Fill in this information to identify your case:		
United States Bankruptcy Court for the :		
NORTHERN District of ILLINOIS (State)		
Case Number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Id	lentify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full	name		
	name that is on your	William	Michelena First name
identification	ion (for example, er's license or	James	Tistnane
passport).		Middle name	Middle name
	ion to your meeting	Sayvor Last name	Sayvor Last name
with the tru	rustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
	names you		Michelena
have use years	ed in the last 8	First name	First name
•	our married or	Middle name	Middle name Austin
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
your Soc	cial Security	XXX - XX - <u>6956</u>	xxx - xx - <u>5157</u>
Individual	l Taxpayer	OR	OR
identificat	uon number	9xx - xx	9 xx - xx
Include your aiden na 3. Only the your Socumber or Individual	ed in the last 8 our married or ames. last 4 digits of cial Security or federal	Middle name Last name First name Middle name Last name XXX - XX - 6956 OR	First name Middle name Austin Last name First name Middle name Last name XXX - XX - 5157 OR

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Document Sayvor William James Debtor 1 Case Number (if known) Last Name

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	Business name Business name EIN EIN	Business name Business name EIN EIN	
5.	Where you live	2015 Shelly Drive Number Street	If Debtor 2 lives at a different address: Number Street	
		Rockford IL 61101 City State ZIP Code WINNEBAGO County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	City State ZIP Code County If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.	
		P.O. Box City State ZIP Code	Number Street P.O. Box City State ZIP Code	
6.	Why you are choosing this district to file for bankruptcy.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408	

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Debtor 1

William **James** Document Sayvor

Last Name

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Case Number (if known)

Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals The chapter of the Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file Chapter 7 under ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No bankruptcy within the _{District} None last 8 years? _____ When ___ ☐ Yes. Case Number MM / DD / YYYY District None __ When ___ ___ Case Number ___ MM / DD / YYYY ____ When ___ _____ Case Number ___ MM / DD / YYYY No 10. Are any bankruptcy cases pending or being filed by a spouse who is Yes. not filing this case with _____ When ____ Case Number, if known _____ you, or by a business MM / DD / YYYY parter, or by affiliate? _ Relationship to you _ When _ Case Number, if known ____ District MM / DD / YYYY 11. Do you rent your ☐ No. Go to line 12 residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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Debtor 1	William	am James		Page 4 of 72 Case Number (if known)	
	First Name	Middle Name	Last Name	· , ,	

	Report About Any Busine	esses You Ow	n as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No. □ Yes.	Go to Part 4. Name and location of b	business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as		Name of business, if any		
	a corporation, partnerhsip, or LLC. If you have more than one sole proprietorship, use a separate sheed and attach it		Number Street		
	to this petition.		City		State Zip Code
			Check the appropriate	box to describe your business:	
			☐ Health Care Busi	iness (as defined in 11 U.S.C. § 10	1(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. §	101(51B))
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the abov	/e	
	For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	□ No. I	the Bankruptcy Code.	11, but I am NOT a small busines:	s debtor according to the definition in tor according to the definition in the
Pa	Report if You Own or Have	ve Any Hazard	lous Property or Any Prop	perty That Needs Immediate Attenti	on
14.	Do you own or have any property that poses or is alleged to pose a threat	No.	What is the hazard?		
	of imminent and indentifiable hazard to public health or safety? Or do you own any				
	property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building		If immediate attention is	needed, why is it needed?	
	that needs urgent repairs?		Where is the property?		
			which is the property:	Number Street	
			, .		

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James

Document

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Desc Main

Debtor 1

William

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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William James Debtor 1

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Case Number (if known)

Pa	rt 6: Answer These Questions	for Reporting Purposes		
16.	What kind of debts do you have?	as "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or investing the second of the	consumer debts? Consumer debts are det primarily for a personal, family, or household p business debts? Business debts are debts estment or through the operation of the business we that are not consumer debts or business d	s that you incurred to obtain
17.	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		napter 7. Go to line 18. er 7. Do you estimate that after any exempt p s are paid that funds will be available to distrib	
18.	How many creditors do you estimate that you owe?	☐ 1-49 ■ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19.	How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pa	rt 7: Sign Below			
For	you	correct. If I have chosen to file under Chapt of title 11, United States Code. I un under Chapter 7. If no attorney represents me and I this document, I have obtained and I request relief in accordance with the I understand making a false statem.	It declare under penalty of perjury that the information of the penalty of perjury that the information of the penalty of perjury that the information of the penalty of th	e, under Chapter 7, 11,12, or 13 ster, and I choose to proceed not an attorney to help me fill out (b). ecified in this petition. or property by fraud in connection
		Signature of Debtor 1 Executed on 02/26/2016	Signal	ture of Debtor 2 uted on 02/26/2016 MM / DD / YYYY

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Debtor 1	William James		Sayvor	Case Number (if known)
	First Name	Middle Name	Last Namo	

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

🗶 /s/ Jason Kyle Nielson	Date	Date: 03/03/2016 MM / DD / YYYY	
Signature of Attorney for Debtor	24.0		
Jason Kyle Nielson			
Printed name			
Geraci Law L.L.C.			
Firm name		_	
55 E. Monroe St., #3400			
Number Street			
Chicago	IL	60603	
City	State	ZIP Code	
Contact Phone312-332-1800	Email ac	ddressndil@geracila	w.com
6288458	IL		
Bar number	State		

Fill in this information to identify your case:						
Debtor 1	William	James	Sayvor			
	First Name	Middle Name	Last Name			
Debtor 2	Michelena		Sayvor			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State)						
Case Number						
(If known)						

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

1. Schedule A/B- Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Part 1:	Summarize Your Assets	
1a. Copy line 55, Total real estate, from Schedule A/B			
1c. Copy line 63, Total of all property on Schedule A/B	1a. Copy	y line 55, Total real estate, from Schedule A/B	
Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	1b. Copy	/ line 62, Total personal property, from Schedule A/B	Ψ 110,000
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	1c. Copy	y line 63, Total of all property on Schedule A/B	\$ 116,965
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F 4. Schedule 1: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I 5. Schedule J: Your Expenses (Official Form 106J) S4 333 00	Part 2:	Summarize Your Liabilities	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D			
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>			\$27,326
Summarize Your Liabilities 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	3а. Сору	the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	3b. Сору	the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I			
Copy your combined monthly income from line 12 of <i>Schedule I</i>	Part 3:	Summarize Your Liabilities	
34 333 UU			\$4,348.55
			\$4,333.00

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_ Case Number (if known) _ William Debtor 1 **James**

Page 9 of 72 Document First Name Middle Name Last Name **EntriesDescription** <u>AssetsAmount</u> **LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 7,552.35 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 82,823.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.)

\$ 0.00

\$ 82,823.00

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

Fill in this in	Caco 16 901 formation to identify yo			Entered 03/14/16 0 of 72	09:18:57	Desc N	<i>M</i> ain	
	William	James	Sayvor	0 0 2				
Debtor 1	First Name	Middle Name	Last Name					
Debtor 2	Michelena		Sayvor					
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States	Bankruptcy Court for the : _	NORTHERN Dist	rict of <u>ILLINOIS</u> (State)			_		
Case Number	·		(Otale)				heck if this	
Official E	orm 1064/D					aı	mended fili	ng
	<u>orm 106A/B</u> e A/B: Prope i	rts,						12/15
ategory where esponsible for ages, write yo	you think it fits best. B supplying correct infor ur name and case numb Describe Each Residence	e as complete and mation. If more sp per (if known). Ans , Building, Land, or	an asset only once. If an asset accurate as possible. If two mace is needed, attach a separatewer every question. Other Real Esate You Own or Harn any residence, building, land	arried people are filing togeth te sheet to this form. On the to we an Interest In	er, both are equa	lly		
No. Yes.	Describe		your entries fro Part 1, includin					
you have at	tached for Part 1. Write	that number here)					\$0.00
Part 2:	Describe Your Vehicles							
03. Cars, vans No. Yes.	s, trucks, tractors, sport							
	/lake: /lodel:	Sportage	Who has an interest in the Debtor 1 only	property? Cneck one.	Do not deduct the amount of a Creditors Who	any secured cla	aims on Sche	dule D:
	ear:	150,000	Debtor 2 only Debtor 1 and Debtor 2 only		Current value entire propert		Current val	
	Other information:	 -	At least one of the debtors	and another	¢	3,640.00	¢	3,640.00
	Anter miormation.		Check if this is communications)	inity property (see	•		<u> </u>	
N	Nake:	Chevrolet	Who has an interest in the	property? Check one.	Do not deduct the amount of a		•	
N	Model:	Impala	Debtor 1 only		Creditors Who	•		
Y	'ear:	2015	Debtor 2 only Debtor 1 and Debtor 2 only	V	Current value		Current val	
A	approximate Mileage:	5,000	At least one of the debtors		entire propert	<u>.</u> y?	portion you	ı own?
C	Other information:				\$	20,825.00	\$	20,825.00
			instructions)	inity property (see				
Examples: No. Yes. Add the dol	Boats, trailers, motors, pers Describe lar value of the portion	onal watercraft, fishin	ecreational vehicles, other vehi g vessels, snowmobiles, motorcycle a your entries fro Part 2, includin	accessories g any entries for pages				\$ 24,465.00
you nave at	iacijeu jor Pari Z. Write	; mai number nere			-			

Debtor 1

William

Case 16-80595

Describe.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

for Part 3. Write that number here -->

Doc 1

Desc Main

0.00

\$4,300.00

Describe Your Personal and Household Items Part 3: Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims 06. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No. Describe..... Furniture, linens, small appliances, table & chairs, bedroom set \$2,500 2,500.00 07. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No. Yes. Describe..... Flat screen TV, computer, printer, music collection, cell phone \$1,000 1,000.00 08. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No. Yes. Describe..... 0.00 09. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No. Describe..... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No. Describe..... Yes. 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No. es Describe..... Everyday clothes, shoes, accessories \$300 300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No. Describe..... Everyday jewelry, costume jewelry, wedding rings, watches \$500 500.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No. Describe..... 0.00 14. Any other personal and household items you did not already list, including any health aids you did not list

Debtor 1

William

Case 16-80595

Doc 1

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Desc Main

First Name

Document Last Name

Describe Your Financial Assets Part 4:

БО	you own or	nave any lega	i or equitable interest in any of the fo	ilowing ?	portion you own? Do not deduct secured claims or exemptions
16.	Cash				
	No.	Money you have i	n your wallet, in your home, in a safe deposi	t box, and on hand when you file your petition	
	Yes.	Describe			\$ 0.00
17.	Deposits o	f money			\$ <u> </u>
			s, or other financial accounts; certificates of o If you have multiple accounts with the same	deposit; shares in credit unions, brokerage houses, institution, list each.	
	Yes.	Describe	71.	stitution name:	
			Checking Account	ABD Credit Union	\$
			Other financial account	NetSpend	\$ 100.00 \$ 200.00
18.	Bonds, mu	tual funds, or p	oublicly traded stocks		\$ <u></u>
		Bond funds, inves	stment accounts with brokerage firms, money	y market accounts	
	No.	Describe	Institution or issuer name:		
	103.	Describe	monation of local manner		\$0.00
19.		ly traded stock	and interests in incorporated and ur	nincorporated businesses, including an interest in	
	No.	Describe	Name of Entity and Percent of Owner	rshin:	
	res.	Describe	Name of Entity and 1 Grown of Owner	onp.	\$0.00
20.		=	te bonds and other negotiable and no	-	
	-		de personal checks, cashiers' checks, promi- are those you cannot transfer to someone by		
	Yes.	Describe	Issuer name:		\$ 0.00
21.	Examples: I			accounts, or other pension or profit-sharing plans	\$ <u> </u>
	Yes.	Describe	Pension plan	IMRF	\$ 1,000.00
			401(k) or similar plan	Fidelity	\$ 8,000.00
					\$\$
22.	Your share		epayments osits you have made so that you may contin landlords, prepaid rent, public utilities (electr		
	Yes.	Describe	Institution name or individual:		
	• • • • • • • • • • • • • • • • • • • •				\$ <u>0.0</u> 0
23.	No.	A contract for	a periodic payment of money to you,	either for life or for a number of years)	
	Yes.	Describe	Issuer name and description:		
24.			IRA, in an account in a qualified ABL A(b), and 529(b)(1).	E program, or under a qualified state tuition program.	\$ <u>0.0</u> 0
	Yes.	Describe	Institution name and description. Sep	arately file the records of any interests.11 U.S.C. § 521(c):	
25	Truete oa	iitahla ar futur	o intorosts in proporty (other than any	thing listed in line 1) and rights or newers	\$ <u> </u>
£IJ.	No.	masie oi luturi	o interests in property (other than an)	ything listed in line 1), and rights or powers	
	Yes.	Describe			\$ 0.00
26.	Examples: I		emarks, trade secrets, and other inteliames, websites, proceeds from royalties and		<u> </u>
	No.	Decerib -			
	Yes.	Describe			\$ 0.00

Debtor 1

Desc Main

Filed 03/14/16 Entered 03/14/16 09:18:57 Case 16-80595 Doc 1 William Page 13 of 2 umber (if known) Dőčüment 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Yes Describe..... 0.00 Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions 28. Tax refunds owed to you Describe..... 0.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No. Describe..... \$79,000 Past due child support, 79,000.00 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No. Yes. Describe..... 0.00 31. Interest in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. Company Name & Beneficiary: Describe..... Yes. Term Life \$0 Term Life Insurance \$0 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. Yes. Describe..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. Describe..... Yes. 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights Describe..... Yes. 0.00 35. Any financial assets you did not already list Nο

Yes.

Describe.....

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached

0.00

\$88,200.00

ebtor 1	William

Case 16-80595 Doc 1 Filed 03/14/16 Entered 03/14/16 09:18:57 Desc Main Page 14 of 2 umber (if known) Dőčüment Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Business License \$0 Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned No. Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Describe..... Yes. 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No. Describe..... Yes. 0.00 41. Inventory No. Describe..... Yes. 0.00 42. Interests in partnerships or joint ventures No. Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Describe..... 0.00 44. Any business-related property you did not already list No. Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Describe..... Yes. 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish Yes. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00

Describe.....

Yes.

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

0.00

Debtor 1 William Case 16-80595 Doc 1 Filed 03/14/16 Entered 03/14/16 09:18:57 Desc Main Plate Name Page 15 of Page 15 of

50. Farm and fishing supplies, chemicals, and feed No.		
Yes. Describe		
51. Any farm- and commercial fishing-related property you did not already list		\$0.00
No.		
Yes. Describe		\$
52. Add the dollar value of all of your entries from Part 6, including any entries	s for pages you have attached	
for Part 6. Write that number here	>	\$0.00
Part 7: Describe All Property You Own or Have an Interest in That You Did N	lot List Above	
53. Do you have other property of any kind you did not already list?		
Examples: Season tickets, country club membership No.		
Yes. Describe		
		<u> </u>
54. Add the dollar value of all of your entries from Part 7. Write that number h	ere>	\$0.00
Part 8:		
55. Part 1: Total real estate, line 2		\$ 0.00
56. Part 2: Total vehicles, line 5	\$ 24,465.00	
57. Part 3: Total personal and household items, line 15	\$ 4,300.00	
58. Part 4: Total financial assets, line 36	\$ 88,200.00	
59. Part 5: Total business-related property, line 45	\$ 0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00	
61. Part 7: Total other property not listed, line 54	\$ 0.00	
62. Total personal property. Add lines 56 through 61	\$ 116,965.00	\$ 116,965.00
63. Toal of all property on Schedule A/B. Add line 55 + line 62		\$116,965.00

Official Form 106A/B Record # 701962 Schedule A/B: Property Page 6 of 6

Case 16-80595 Doc 1 Filed 03/14/16 Entered 03/14/16 09:18:57 Desc Main

Fill in this in	nformation to identify	your case:	
Debtor 1	William	James	Sayvor
	First Name	Middle Name	Last Name
Debtor 2	Michelena		Sayvor
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	s Bankruptcy Court for the	e: <u>NORTHERN</u> District of _	<u>ILLINOIS</u>
			(State)
Case Number	r		
(If known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identif	y the Property You Claim as Exempt	!		
Which set of ex	emptions are you claiming? Chec	k one only, even if your sp	ouse is filing with you.	
You are clair	ming state and federal nonbankrupt	cy exemptions . 11 U.S.C.	§ 522(b)(3)	
You are clair	ming federal exemptions. 11 U.S.C.	§ 522(b)(2)		
For any propert	y you list on <i>Schedule A/B</i> that yo	ou claim as exempt, fill in	the information below.	
•	on of the property and line on hat lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	2007 Kia Sportage with over 150,000 miles.	\$ 3,640	\$ 4,800	735 ILCS 5/12-1001(c) - \$4,800.00
Line from Schedule A/B:	03		100% of fair market value, up to any applicable statutory limit	
Brief description:	Furniture, linens, small appliances, table & chairs, bedroom set	\$_ 2,500	\$	735 ILCS 5/12-1001(b) - \$2,500.00
Line from Schedule A/B:	06		100% of fair market value, up to any applicable statutory limit	
Brief description:	Flat screen TV, computer, printer, music collection, cell phone	\$_ 1,000	<u></u> \$	735 ILCS 5/12-1001(b) - \$1,000.00
Line from Schedule A/B:	07		100% of fair market value, up to any applicable statutory limit	
Brief description:	Everyday clothes, shoes, accessories	\$ <u>300</u>	 \$	735 ILCS 5/12-1001(a),(e) - \$300.00
Line from Schedule A/B:	11		100% of fair market value, up to any applicable statutory limit	
fficial Form 106C	Record # 701962	Schedule C: T	he Property You Claim as Exempt	Page 1 of 2

Case 16-80595 Doc 1 Filed 03/14/16 Entered 03/14/16 09:18:57 Desc Main Document Page 17 of 72 Case Number (if known)

Debtor 1

William First Name

Middle Name Last Name

	on of the property and line on hat lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Everyday jewelry, costume jewelry, wedding rings, watches	\$ <u>500</u>	 \$	735 ILCS 5/12-1001(b) - \$500.00
Line from Schedule A/B:	12		100% of fair market value, up to any applicable statutory limit	
Brief description:	Checking Account, ABD Credit Union, 100.00	\$ <u>100</u>	 \$	735 ILCS 5/12-1001(b) - \$100.00
Line from Schedule A/B:	<u>17</u>		100% of fair market value, up to any applicable statutory limit	
Brief description:	Other financial account, NetSpend, 100.00	\$ <u>100</u>	 \$	735 ILCS 5/12-1001(b) - \$100.00
Line from Schedule A/B:	<u>17</u>		100% of fair market value, up to any applicable statutory limit	
Brief description:	401(k) or similar plan, Fidelity, 8,000.00	\$_8,000	 \$	11 U.S.C. 522(b)(3)(C) - \$0.00
Line from Schedule A/B:	21		100% of fair market value, up to any applicable statutory limit	
Brief description:	Pension plan, IMRF, 1,000.00	\$_1,000	\$	40 ILCS 5/16-190 - \$0.00
Line from Schedule A/B:	21		100% of fair market value, up to any applicable statutory limit	
Brief description:	Past due child support,	\$_79,000	\$	735 ILCS 5/12-1001(g)(4) - \$0.00
Line from Schedule A/B:	<u>29</u>		100% of fair market value, up to any applicable statutory limit	
(Subject to adjust	g a homestead exemption of more stment on 4/01/16 and every 3 years a scaping the property covered by the	s after that for cases filed o	,	
Official Form 1060	Record # 701962	Schedule C: T	he Property You Claim as Exempt	Page 2 of 2

ııı ılı ulis il	nformation to ident	tify your case:		Entered 03/14/ 8 of 72	20 00120101	Desc Main	
Debtor 1	William	James	Sayvor				
	First Name	Middle Name	Last Name	_			
Debtor 2	Michelena		Sayvor	_			
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for	the : <u>NORTHERN</u>	District of <u>ILLINOIS</u>				
O N	_		(State)			Check if this	s is an
Case Numbe (If known)	r					amended fi	
ficial C	orm 106D						9
<u>liciai F</u>	<u>orm 106D</u>						
hedule	D: Credito	rs Who Have	Claims Secured by	Property			12
Yes. Fi	neck this box and soll in all of the inform	nation below.	e court with your other schedules.	You have nothing else to rep	oort on this form.		
2010		aims					
		aims			Column A	Column A	Column C
		creditor has more that	an one secured claim, list the cred	•	Column A Amount of claim	Column A Value of collateral	
for each c	laim. If more than	creditor has more that	articular claim, list the other credite	ors in Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecure portion
for each c	laim. If more than	creditor has more that		ors in Part 2.	Amount of claim	Value of collateral	Unsecure
for each c	laim. If more than as possible, list the	creditor has more that	articular claim, list the other credite	ors in Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecure portion If any
for each c As much a GM Fin Creditor's	laim. If more than as possible, list the nancial	creditor has more that	articular claim, list the other credit al order according to the creditors	ors in Part 2. name. cures the claim:	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
for each c As much a GM Fin Creditor's Po Box	laim. If more than as possible, list the nancial Name 181145	creditor has more that	articular claim, list the other credit al order according to the creditors Describe the property that sec	ors in Part 2. name. cures the claim:	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
for each c As much a GM Fin Creditor's	laim. If more than as possible, list the nancial	creditor has more that	articular claim, list the other creditional order according to the creditors Describe the property that sec 2015 Chevrolet Impala with o	ors in Part 2. care the claim: over 5,000 miles	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
for each c As much a GM Fin Creditor's Po Box	laim. If more than as possible, list the nancial Name 181145	creditor has more that	articular claim, list the other creditional order according to the creditors Describe the property that second 2015 Chevrolet Impala with o	ors in Part 2. care the claim: over 5,000 miles	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
for each c As much a GM Fin Creditor's Po Box	laim. If more than as possible, list the nancial Name 181145 Street	creditor has more that	articular claim, list the other creditional order according to the creditors Describe the property that sec 2015 Chevrolet Impala with o As of the date you file, the claim Contingent	ors in Part 2. care the claim: over 5,000 miles	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
GM Fin Creditor's Po Box Number	laim. If more than as possible, list the nancial Name 181145 Street	creditor has more the one creditor has a po- claims in alphabetic	articular claim, list the other creditional order according to the creditors Describe the property that sec 2015 Chevrolet Impala with o As of the date you file, the claim Contingent Unliquidated	ors in Part 2. care the claim: over 5,000 miles	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
GM Fin Creditor's Po Box Number Arlingto City	laim. If more than as possible, list the nancial Name 181145 Street	creditor has more that one creditor has a particular claims in alphabetic claims in alphabetic claims are claims. TX 76096 State Zip Code	articular claim, list the other creditional order according to the creditors Describe the property that sec 2015 Chevrolet Impala with o As of the date you file, the claim Contingent Unliquidated Disputed	ors in Part 2. s name. cures the claim: over 5,000 miles im is: Check all that apply.	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
GM Fin Creditor's Po Box Number Arlingto City Who owes	laim. If more than as possible, list the nancial Name 181145 Street	creditor has more that one creditor has a particular claims in alphabetic claims in alphabetic claims are claims. TX 76096 State Zip Code	articular claim, list the other creditions all order according to the creditors Describe the property that sec 2015 Chevrolet Impala with o As of the date you file, the claim Contingent Unliquidated Disputed Nature of Lien. Check all that a	ors in Part 2. s name. cures the claim: over 5,000 miles im is: Check all that apply.	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
GM Fin Creditor's Po Box Number Arlingto City Who owes	laim. If more than as possible, list the nancial Name 181145 Street on s the debt? Check or 1 only	creditor has more that one creditor has a particular claims in alphabetic claims in alphabetic claims are claims. TX 76096 State Zip Code	articular claim, list the other creditions all order according to the creditors Describe the property that sec 2015 Chevrolet Impala with o As of the date you file, the claim Contingent Unliquidated Disputed Nature of Lien. Check all that a An agreement you made (suc	ors in Part 2. s name. cures the claim: over 5,000 miles im is: Check all that apply.	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
GM Fin Creditor's Po Box Number Arlingto City Who owes Debtor Debtor	laim. If more than as possible, list the nancial Name 181145 Street on s the debt? Check or 1 only	creditor has more that one creditor has a particular claims in alphabetic claims in alphabetic claims are claims. TX 76096 State Zip Code	articular claim, list the other creditions all order according to the creditors Describe the property that sec 2015 Chevrolet Impala with o As of the date you file, the claim Contingent Unliquidated Disputed Nature of Lien. Check all that a	ors in Part 2. cures the claim: ever 5,000 miles im is: Check all that apply.	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
GM Fin Creditor's Po Box Number Arlingto City Who owes Debtor Debtor	laim. If more than as possible, list the nancial Name .181145 Street on s the debt? Check or 1 only 2 only	creditor has more the one creditor has a proclaims in alphabetic state. TX 76096 State Zip Code ne.	articular claim, list the other creditions all order according to the creditors Describe the property that section 2015 Chevrolet Impala with of Contingent Unliquidated Disputed Nature of Lien. Check all that all An agreement you made (succar loan)	ors in Part 2. cures the claim: ever 5,000 miles im is: Check all that apply.	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
GM Fin Creditor's Po Box Number Arlingto City Who owes Debtor Debtor At leass	laim. If more than as possible, list the nancial Name 181145 Street Street on s the debt? Check or 1 only 2 only 1 and Debtor 2 only t one of the debtors ar if this claim relates	creditor has more the one creditor has a proclaims in alphabetic claims in alphabetic claims. TX 76096 State Zip Code code code code code code code code c	articular claim, list the other credit al order according to the creditors Describe the property that sec 2015 Chevrolet Impala with o As of the date you file, the clai Contingent Unliquidated Disputed Nature of Lien. Check all that a An agreement you made (suc car loan) Statutory lien (such as tax lier	ors in Part 2. s name. cures the claim: ever 5,000 miles im is: Check all that apply. pply. ch as mortgage or secured n, mechanic's lien)	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecure portion If any
GM Fin Creditor's Po Box Number Arlingto City Who owes Debtor Debtor At leas:	laim. If more than as possible, list the nancial Name 181145 Street on s the debt? Check or 1 only 2 only 1 and Debtor 2 only t one of the debtors ar if this claim relates unity debt	creditor has more the one creditor has a proclaims in alphabetic claims in alphabetic claims. TX 76096 State Zip Code code code code code code code code c	articular claim, list the other creditions all order according to the creditors Describe the property that sec 2015 Chevrolet Impala with o Contingent Unliquidated Disputed Nature of Lien. Check all that all An agreement you made (suc car loan) Statutory lien (such as tax lier Judgment lien from a lawsuit	ors in Part 2. s name. cures the claim: over 5,000 miles im is: Check all that apply. pply. ch as mortgage or secured n, mechanic's lien)	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	

Fi	ll in this	Caso 16 90		Filod 02/14/16		03/14/16 09 of 72):18:57	Desc Mair	า
		VACID	1	0	J (71.72			
D	ebtor 1	William	James	Sayvor	_				
_	. 1. 1 0	First Name Michelena	Middle Name	Last Name Sayvor					
	ebtor 2 pouse, if filin		Middle Name	Last Name	_				
		•							
U	nited Sta	tes Bankruptcy Court for the	: <u>NORTHERN</u> Distr	ict of <u>ILLINOIS</u> (State)				Па	
	ase Num f known)	ber							if this is an
								amend	ed filing
<u>Off</u>	icial	Form 106E/F							
<u>Scł</u>	nedu	le E/F: Creditor	s Who Have	Unsecured Claim	IS				12/1
A/B: I credit needs top o	Propert tors wit ed, cop	y (Official Form 106A/B) h partially secured claim	and on Schedule G: as that are listed in S t out, number the ent ur name and case nu	ed leases that could result i Executory Contracts and U chedule D: Creditors Who I- tries in the boxes on the left mber (if known).	Inexpired Leases (Have Claims Secui	(Official Form 106G red by Property. If I	i). Do not inclu more space is	de any	
				inat yay?					
1. 6	_ `	creditors have priority ur	isecured ciaims agai	nst you?					
L	No.	Go to Part 2.							
	Yes.								
e r	each cla nonprior unsecur	im listed, identify what typity amounts. As much as ed claims, fill out the Con	oe of claim it is. If a cla possible, list the clain tinuation Page of Part	has more than one priority u aim has both priority and non as in alphabetical order accor 1. If more than one creditor actions for this form in the ins	priority amounts, li rding to the credito holds a particular o	st that claim here ar	nd show both portion to the more than two	riority and o priority	
,					,		Total claim	Priority	Nonpriority
2.1	7 Patri	cia Patton		ast 4 digits of account number	or		\$ 0.00	amount \$ 0.00	amount \$ 0.00
2.1		or's Name		Last 4 digits of account number	ei		*	- 	
	1270	Sandhurst		When was the debt incurred?					
	Numb	er Street							
				As of the date you file, the clai	im is: Check all that	apply.			
	Sout	h Elgin IL	. 60177 L	Contingent					
	City		ate Zip Code	Unliquidated					
		ves the debt? Check one.	L	Disputed					
	=	tor 1 only							
	Deb	tor 2 only]	Type of PRIORITY unsecured of	claim:				
	Deb	tor 1 and Debtor 2 only	<u> </u>	Domestic support obligations					
	∐At le	east one of the debtors and ar	nother	Taxes and certain other debts	you owe the governr	ment			
	_	eck if this claim relates to a		¬					
		nmunity debt	L	Claims for death or personal in	njury while you were				
		laim subject to offest?	_	intoxicated					
	No No			Other. Specify Child Supp	port				
	Yes								

Debtor 1	william	James	Sayvor!!!O!!	Case Number (ii	f known)		_
	First Name	Middle Name	Last Name				
Part	1: Your PRIORITY Unsecu	ıred Claims - Conti	nuation Page				
	Tour Friday Friday	irea Giainis - Goitti					
After lis	sting any entries on this pag	e, number them b	peginning with 2.3, followed by 2.4, and	d so forth.	Total claim	Priority	Nonpriority
						amount	amount
2.2	Shaquonda Lee		Last 4 digits of account number		\$_0.00	\$ <u>0.00</u>	\$ <u>0.00</u>
	Creditor's Name						
	225 College St. #1		When was the debt incurred?				
	Number Street						
			As of the date you file the claim is:	Chook all that apply			
			As of the date you file, the claim is:	Check all that apply.			
	Elgin	IL 60120	Contingent				
		State Zip Code	Unliquidated				
l w	ho owes the debt? Check one.	State 2.p Sout	Disputed				
	Debtor 1 only						
Ī	Debtor 2 only		Type of PRIORITY unsecured claim:				
7	Debtor 1 and Debtor 2 only		Domestic support obligations				
⊨	=	0		we the government			
	At least one of the debtors and		Taxes and certain other debts you or	we the government			
L	Check if this claim relates to	оа	Па				
le le	community debt the claim subject to offest?		Claims for death or personal injury w	hile you were			
13	No		intoxicated				
	₹		Other. Specify Child Support				
	Yes						
Part	List All of Your NONP	RIORITY Unsecure	d Claims				
2 Do	any creditors have nonprior	rity uncocured els	nime against you?				
3. D 0	any creditors have nonprior	inty unsecured cit	anns against you:				
	No. You have nothing to rep	port in this part. S	ubmit this form to the court with your oth	ner schedules.			
	Yes.						
4 1:0		anned alaima in t	ha alababatian audau af tha araditau u	uha halda asah alaim Ifo o	raditar has mare than a		
			the alphabetical order of the creditor v				
	· ·		ately for each claim. For each claim listed a particular claim, list the other creditors			·-	
	ims fill out the Continuation P		a particular claim, list the other creditors	s in Fait 3.ii you nave more	than three nonphonty o	iisecuieu	
Gia	inis iiii out the Continuation F	age of Fait 2.					Total claim
	Accounts Receivable MG		Look A digita of account growther	2213			\$ 139.00
4.1	Creditor's Name		Last 4 digits of account number				Ψ_100.00
	7834 N 2Nd St Ste 5		When was the debt incurred?	2015-2015			
			Then was the dest meaned.				
	Number Street						
			As of the date you file, the claim is:	Check all that apply.			
			Contingent				
		IL 61115	Unliquidated				
١,,	City /ho owes the debt? Check one.	State Zip Code	Disputed				
_							
	Debtor 1 only						
<u> </u>	Debtor 2 only		Type of NONPRIORITY unsecured c	laim:			
[Debtor 1 and Debtor 2 only		Student loans				
	At least one of the debtors and	another	Obligations arising out of a separation	on agreement or divorce			
_	_						
Г	Check if this claim relates to	а	that you did not report as priority clai	ms			
	Check if this claim relates to community debt	оа	that you did not report as priority clai Debts to pension or profit-sharing pla				
Is		o a					
_	community debt	о а					

Official Form 106E/F

Doc 1 Filed 03/14/16 Entered 03/14/16 09:18:57 Desc Main Case 16-80595

Page 21 of 72 Case Number (if known) **Document** William James Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them	beginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.2 Advance Cash Express	Last 4 digits of account number	\$ <u>1,070.00</u>
Creditor's Name	2015	
3929 Broadway # 3	When was the debt incurred? 2015	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Rockford IL 61108	Unliquidated	
City State Zip Code	Disputed	
Who owes the debt? Check one.		
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt Is the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
No	- Paulana	
Yes	Other. Specify PayDay Loan	
4.3 AES/ESA	Last 4 digits of account number 0001	\$ 1,356.00
Creditor's Name	Last 4 digits of account manner	*
Po Box 61047	When was the debt incurred? 2006-2014	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
		
Harrisburg PA 17106	☐ Contingent	
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Other. Specify	
Yes	0000	- 2.544.00
4.4 AES/ESA	Last 4 digits of account number 0002	\$ <u>2,541.00</u>
Creditor's Name Po Box 61047	When was the debt incurred? 2006-2014	
	Their was the dest incurred:	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
Harrisburg PA 17106	Contingent	
	Unliquidated	
City State Zip Code Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	_ , , , , , , , , , , , , , , , , , , ,	
No	Other. Specify	
Yes		

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Case Number (if known) Document William James Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.5	AES/ESA	Last 4 digits of account number 0005	\$ <u>2,773.00</u>
	Creditor's Name		
	Po Box 61047	When was the debt incurred? 2007-2014	
	Number Street		
	Number Succe		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Harrisburg PA 17106		
	City State Zip Code	Unliquidated	
v	Vho owes the debt? Check one.	Disputed	
	–	_	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
ΙГ	Debtor 1 and Debtor 2 only	Student loans	
lī	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	=		
L	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
ls ls	the claim subject to offest?		
	No	Other. Specify	
Ī	Yes		
140	AES/ESA	Last 4 digits of account number 0003	\$ 2,888.00
4.6		Last 4 digits of account number	Ψ_=,555.55
	Creditor's Name	When was the debt incurred? 2006-2014	
	Po Box 61047	When was the debt incurred?	
	Number Street		
		As of the date you file the eleips in Charles II that and	
		As of the date you file, the claim is: Check all that apply.	
	Hamisham DA 47400	Contingent	
	Harrisburg PA 17106	Unliquidated	
	City State Zip Code	Disputed	
<u>v</u>	/ho owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
1 7		Student loans	
	Debtor 1 and Debtor 2 only		
L	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
ΙГ	Check if this claim relates to a	that you did not report as priority claims	
"	community debt	Debts to pension or profit-sharing plans, and other similar debts	
ls ls	s the claim subject to offest?		
Ï	No		
1 7	=	Other. Specify	
-	_Yes	0000	. 0.004.00
4.7	AES/ESA	Last 4 digits of account number 0006	\$ <u>3,231.00</u>
	Creditor's Name		
	Po Box 61047	When was the debt incurred? 2007-2014	
1	Number Street		
1			
1		As of the date you file, the claim is: Check all that apply.	
1		Contingent	
	Harrisburg PA 17106	Unliquidated	
	City State Zip Code		
v	/ho owes the debt? Check one.	Disputed	
ΙГ	Debtor 1 only		
	Debtor 2 only	Turns of NONDRIGHTY unconsumed alaims	
		Type of NONPRIORITY unsecured claim:	
L	Debtor 1 and Debtor 2 only	Student loans	
Γ	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
7	Check if this claim relates to a	that you did not report as priority claims	
L		Debts to pension or profit-sharing plans, and other similar debts	
	community debt s the claim subject to offest?	La Debis to pension or profit-sharing plans, and other similar debts	
	•	_	
	No	Other. Specify	
	Yes	_	

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Case Number (if known) **Document** William James Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** AES/ESA \$ 6,029.00 Last 4 digits of account number Creditor's Name 2006-2014 Po Box 61047 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Harrisburg PA 17106 Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify _ Yes Arnold Scott Harris PC **\$** 1,325.00 Last 4 digits of account number 4.9 Creditor's Name 2005 111 W. Jackson Blvd., Ste. 600 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 60604 Chicago IL Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt

Is the claim subject to offest? No Other. Specify Collecting for Creditor Yes AT T 6269 \$ 1,626.00 4.10 Last 4 digits of account number Creditor's Name 2014-2015 8014 Bayberry Rd When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Jacksonville 32256 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify ___Collecting for Creditor

Debtor 1	William	Case 16-80595	Doc 1	Filed 03/14/16 Document	Entered 03/14/16 09:18:57 Page 24 of 72 Case Number (if known)	Desc Main	
Debior 1	First Name	Middle Name		Last Name	Case Number (II known)		
Part 2	Your NONPRIORITY Unsecured Claims - Continuation Page						
After listi	After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.						

After lis	After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total Claim				
4.11	AT&T	Last 4 digits of account number	\$ <u>1,100.00</u>		
	Creditor's Name				
	PO Box 8212	When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
		Contingent			
	Aurora IL 60572-8212	Unliquidated			
w	City State Zip Code /ho owes the debt? Check one.	Disputed			
Ϊ́	Debtor 1 only				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:			
1 7	Debtor 1 and Debtor 2 only	Student loans			
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce			
		that you did not report as priority claims			
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts			
Is	the claim subject to offest?				
	No	Other. Specify Utility Bills/Cellular Service			
	Yes				
4.12	BMO Harris N.A.	Last 4 digits of account number	\$ <u>800.00</u>		
	Creditor's Name				
	3800 West Golf Road, Suite 300	When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
	Dallian Mandaus II 00000	Contingent			
	Rolling Meadows IL 60008	Unliquidated			
l v	City State Zip Code /ho owes the debt? Check one.	Disputed			
Ιг	Debtor 1 only				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:			
ΙĒ	Debtor 1 and Debtor 2 only	Student loans			
ř	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce			
7	Check if this claim relates to a	that you did not report as priority claims			
-	community debt	Debts to pension or profit-sharing plans, and other similar debts			
Is	the claim subject to offest?				
	No	Other. Specify Checking Account			
\vdash	Yes				
4.13	Capital One	Last 4 digits of account number0680	\$ <u>452.00</u>		
	Creditor's Name PO Box 21887	When was the debt incurred? 2015			
	Number Street	——————————————————————————————————————			
	Number Sueet				
		As of the date you file, the claim is: Check all that apply.			
	Eagan MN 55121	Contingent			
	City State Zip Code	Unliquidated			
W	/ho owes the debt? Check one.	Disputed			
[Debtor 1 only				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Student loans			
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce			
Γ	Check if this claim relates to a	that you did not report as priority claims			
-	community debt	Debts to pension or profit-sharing plans, and other similar debts			
ls	s the claim subject to offest?	_			
	No	Other. Specify Credit Card or Credit Use			
	Yes				

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Case Number (if known) **Document** William James Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them b	Total Claim		
4.14 Capital ONE BANK USA N	Last 4 digits of account number	NULL	<u>\$ 298.00</u>
Creditor's Name 15000 Capital One Dr	When was the debt incurred?	2014-2016	
Number Street			
	As of the data you file the electricity	Check all that apply	
	As of the date you file, the claim is:	: Опеск ан тпат арріу.	
Richmond VA 23238	Contingent		
City State Zip Code	Unliquidated		
Who owes the debt? Check one.	Disputed		
Debtor 1 only			
Debtor 2 only	Type of NONPRIORITY unsecured of	claim:	
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and another	Obligations arising out of a separati	-	
Check if this claim relates to a	that you did not report as priority cla		
community debt Is the claim subject to offest?	Debts to pension or profit-sharing p	olans, and other similar debts	
No	Other. Specify Credit Card or	Credit Use	
Yes	Other, Specify Oredit Gard of	<u> </u>	
4.15 Comcast Cable	Last 4 digits of account number		\$ 450.00
Creditor's Name			
PO Box 7890	When was the debt incurred?		
Number Street			
	As of the date you file, the claim is:	: Check all that apply.	
Ocethorodoro BA 10000	Contingent		
Southeastern PA 19398	Unliquidated		
City State Zip Code Who owes the debt? Check one.	Disputed		
Debtor 1 only	_		
Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and another	Obligations arising out of a separati	ion agreement or divorce	
Check if this claim relates to a	that you did not report as priority cla	-	
community debt	Debts to pension or profit-sharing p		
Is the claim subject to offest?			
No	Other. Specify Utility Bills/Cell	ular Service	
Yes Commonwealth Edison			* 1 000 00
4.16 Commonwealth Edison	Last 4 digits of account number		\$ <u>1,000.00</u>
Creditor's Name 3 Lincoln Center 4th Floor	When was the debt incurred?		
Number Street			
	As af the data was file than at 1	Charle all that and to	
	As of the date you file, the claim is:	: Спеск ан tnat apply.	
Oakbrook Terrace IL 60181	Contingent		
City State Zip Code	Unliquidated		
Who owes the debt? Check one.	Disputed		
Debtor 1 only			
Debtor 2 only	Type of NONPRIORITY unsecured of	claim:	
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and another	Obligations arising out of a separati	-	
Check if this claim relates to a	that you did not report as priority cla		
community debt	Debts to pension or profit-sharing p	lans, and other similar debts	
Is the claim subject to offest?	There is a little Dille /O-III	ular Sonico	
Yes	Other. SpecifyUtility Bills/Cell	uiai Scivice	

		Case 16-80595	Doc 1	Filed 03/14/16	Entered 03/14/16 09:18:57	Desc Main
Debtor 1	William	James		D gcument	Page 26 of 72	
	First Name	Middle Name		Last Name		
Part 2:	Your	NONPRIORITY Unsecured Cla	ims - Continua	tion Page		
After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.						

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				
4.17	Credit ONE BANK NA	Last 4 digits of account number NULL	\$ 355.00	
	Creditor's Name	When was the debt incurred? 2015-2016		
	Po Box 98875	When was the debt incurred? 2015-2016		
	Number Street			
		As of the date you file, the claim is: Check all that apply.		
	Las Vegas NV 89193	Contingent		
	City State Zip Code	Unliquidated		
W	/ho owes the debt? Check one.	Disputed		
	Debtor 1 only			
[Debtor 2 only	Type of NONPRIORITY unsecured claim:		
[Debtor 1 and Debtor 2 only	Student loans		
[At least one of the debtors and another	Obligations arising out of a separation agreement or divorce		
[Check if this claim relates to a	that you did not report as priority claims		
	community debt the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts		
	No	Out on the Credit Card or Credit Llea		
	Yes	Other. Specify Credit Card or Credit Use		
4.18	Credit ONE BANK NA	Last 4 digits of account number NULL	\$ 485.00	
	Creditor's Name			
	Po Box 98875	When was the debt incurred? 2015-2016		
	Number Street			
		As of the date you file, the claim is: Check all that apply.		
		Contingent		
	Las Vegas NV 89193	Unliquidated		
l w	City State Zip Code /ho owes the debt? Check one.	Disputed		
ΙГ	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured claim:		
ΙĒ	Debtor 1 and Debtor 2 only	Student loans		
Ī	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce		
ΙĒ	Check if this claim relates to a	that you did not report as priority claims		
-	community debt	Debts to pension or profit-sharing plans, and other similar debts		
ls	s the claim subject to offest?			
	■ No ¬.,	Other. Specify Credit Card or Credit Use		
4.40	Yes Creditors Protection S	Last 4 digits of account number 3016	\$ 138.00	
4.19	Creditor's Name	Lust 4 digits of account number		
	308 W State St Ste 485	When was the debt incurred? 2014-2014		
	Number Street			
		As of the date you file, the claim is: Check all that apply.		
		Contingent		
	Rockford IL 61101	Unliquidated		
w	City State Zip Code /ho owes the debt? Check one.	Disputed		
Ϊ́	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce		
	Check if this claim relates to a	that you did not report as priority claims		
	community debt	Debts to pension or profit-sharing plans, and other similar debts		
Is	the claim subject to offest?	_		
	No	Other. Specify Medical Debt		
	Yes			

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Your NONPRIORITY Unsecured Claims - Continuation Page

After lis	sting any entries on this page, number them b	eginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.20	Empress Casino	Last 4 digits of account number	\$ <u>0.00</u>
	Creditor's Name		
	2300 Empress Dr.	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Joliet IL 60436	Unliquidated	
_ v	City State Zip Code /ho owes the debt? Check one.	Disputed	
ľ	Debtor 1 only		
1 7	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
1 7	Debtor 1 and Debtor 2 only	Student loans	
H	=	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
L	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is	the claim subject to offest?		
	No	Other. Specify Notice Only	
	Yes	Gillor. Optiony	
4.21	FED LOAN SERV	Last 4 digits of account number 0009	<u>\$410.00</u>
	Creditor's Name	0045 0045	
	Po Box 60610	When was the debt incurred? 2015-2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Harrisburg PA 17106	Unliquidated	
, v	City State Zip Code /ho owes the debt? Check one.	Disputed	
l ï	Debtor 1 only		
	Debtor 2 only	Turn of NONDRIODITY among a delivery	
	=	Type of NONPRIORITY unsecured claim: Student loans	
H	Debtor 1 and Debtor 2 only		
ᅵ 날	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
L	Check if this claim relates to a	that you did not report as priority claims	
ls	community debt the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
	No	Other. Specify	
ΙĒ	Yes	Other. Specify	
4.22	FED LOAN SERV	Last 4 digits of account number0003	\$ <u>2,274.00</u>
	Creditor's Name		
	Po Box 60610	When was the debt incurred? 2008-2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Harrisburg PA 17106	Unliquidated	
١,,	City State Zip Code	Disputed	
"	/ho owes the debt? Check one.		
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
<u> </u>	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
L	Check if this claim relates to a	that you did not report as priority claims	
le le	community debt the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
	No	Other Courie.	
1 7	Tyes	Other. Specify	

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Case Number (if known) Document William James Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** FED LOAN SERV \$ 2.276.00

4.23	Last 4 digits of account number	\$ <u>Z,Z70.00</u>
Creditor's Name		
Po Box 60610	When was the debt incurred? 2013-2015	
Number Street		
1.00.00		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Harrisburg PA 17106		
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
 		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
. —		
community debt Is the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
	<u>_</u>	
No	Other. Specify	
Yes		
4.24 FED LOAN SERV	Last 4 digits of account number 0005	\$ 2,541.00
Creditor's Name		
Po Box 60610	When was the debt incurred? 2008-2015	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
Harrisburg PA 17106	Contingent	
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Other. Specify	
Yes		
TED LOAN CEDV	Last 4 digits of account number0007	\$ 2,944.00
4.23	Last 4 digits of account number	- /
Creditor's Name	When was the debt incurred? 2011-2015	
Po Box 60610	when was the dept incurred?	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
Harrisburg PA 17106	Contingent	
	Unliquidated	
City State Zip Code Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	_ · · · · · · · · · · · · · · · · · · ·	
No	Double 0	
. =	Other. Specify	
Yes		

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	Creditor's Name	2000 2045
	Po Box 60610	When was the debt incurred? 2008-2015
	Number Street	
		As of the date you file, the claim is: Check all that apply.
		Contingent
	Harrisburg PA 17106	Unliquidated
	City State Zip Code	Disputed
l ,	Who owes the debt? Check one.	
!	Debtor 1 only	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:
[Debtor 1 and Debtor 2 only	Student loans
[At least one of the debtors and another	Obligations arising out of a separation agreement or divorce
	Check if this claim relates to a	that you did not report as priority claims
	community debt	Debts to pension or profit-sharing plans, and other similar debts
	s the claim subject to offest?	
	No	Other. Specify
	Yes SERV	0040
4.27	FED LOAN SERV	Last 4 digits of account number 0010 \$ 5,867.00
	Creditor's Name Po Box 60610	When was the debt incurred? 2015-2015
		when was the dept incurred?
	Number Street	
	- <u></u> -	As of the date you file, the claim is: Check all that apply.
	DA 47400	Contingent
	Harrisburg PA 17106	Unliquidated
١,	City State Zip Code Who owes the debt? Check one.	Disputed
İ	Debtor 1 only	
Ì	Debtor 2 only	Type of NONPRIORITY unsecured claim:
ŀ	Debtor 1 and Debtor 2 only	Student loans
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce
	=	that you did not report as priority claims
[Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts
	s the claim subject to offest?	Debts to pension of profit-straining plans, and other similar debts
İ	No	Other Secrify
l i	Yes	Other. Specify
4.28	FED LOAN SERV	Last 4 digits of account number 0006 \$8,547.00
1.20	Creditor's Name	<u> </u>
	Po Box 60610	When was the debt incurred? 2008-2015
	Number Street	
		As of the date you file, the claim is: Check all that apply.
		Contingent
	Harrisburg PA 17106	Unliquidated
	City State Zip Code	Disputed
	Who owes the debt? Check one.	□ Disputed
<u> </u>	Debtor 1 only	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:
[Debtor 1 and Debtor 2 only	Student loans
[At least one of the debtors and another	Obligations arising out of a separation agreement or divorce
[Check if this claim relates to a	that you did not report as priority claims
	community debt	Debts to pension or profit-sharing plans, and other similar debts
	s the claim subject to offest?	_
	No	Other. Specify
	Yes	

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Case Number (if known) **Document** William James Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** FED LOAN SERV \$ 20,868.00 Last 4 digits of account number Creditor's Name 2001-2015 Po Box 60610 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent PA 17106 Harrisburg Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify _ Yes First Premier BANK NULL \$ 316.00 Last 4 digits of account number 4.30 2013-2016 601 S Minnesota Ave When was the debt incurred? Number Street

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4.3	First Premier BANK	Last 4 digits of account number NULL	\$ <u>876.00</u>
	Creditor's Name		
	601 S Minnesota Ave	When was the debt incurred? 2011-2012	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Sioux Falls SD 57104	Unliquidated	
	City State Zip Code		
	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?		
	No	Other. Specify Credit Card or Credit Use	
	Yes	Other. Specify	
	Crand Viotaria Casina	Land Address of a complete	\$ 0.00
4.3		Last 4 digits of account number	\$ <u>0.00</u>
	Creditor's Name		
	250 S. Grove Ave	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Elgin IL 60120-6447	Contingent	
		Unliquidated	
	City State Zip Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims	
	Check if this claim relates to a		
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?	_	
	No	Other. Specify NSF Checks	
Щ	Yes		
4.	Hollywood Casino	Last 4 digits of account number	\$ 250.00
	Creditor's Name		
	49 W. Galena Blvd.	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Aurora IL 60504	Unliquidated	
	City State Zip Code		
	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?		
	No	Other. Specify NSF Checks	
	Yes		

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4.35	HSBC BANK Nevada N.A.	Last 4 digits of account number 0680	\$ <u>451.00</u>
	Creditor's Name		
	120 Corporate Blvd Ste 1	When was the debt incurred? 2015-2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Norfolk VA 23502	Unliquidated	
	City State Zip Code		
_ <u>v</u>	Who owes the debt? Check one.	Disputed	
L	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
l Ē	Debtor 1 and Debtor 2 only	Student loans	
1 8	=		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
L	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offest?		
	No	Other. Specify Unknown Credit Extension	
	Yes	<u> </u>	
4.36	IRS Non-Priority	Last 4 digits of account number	\$ 375.00
	Creditor's Name	 	
	PO Box 7346	When was the debt incurred? 2005	
	Number Street		
	Number Sueet		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Philadelphia PA 19101	Unliquidated	
	City State Zip Code		
<u> </u>	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
ΙГ	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
l ř	Debtor 1 and Debtor 2 only	Student loans	
	=		
1 5	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
L	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is	the claim subject to offest?		
	No	Other. Specify Taxes - Federal, State/Local	
	Yes		
4.37	IRS Non-Priority	Last 4 digits of account number	\$ <u>401.00</u>
110	Creditor's Name		
	PO Box 7346	When was the debt incurred? 2011	
1	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Philadelphia PA 19101	Unliquidated	
	City State Zip Code	Disputed	
<u>'</u>	Vho owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
7	Debtor 1 and Debtor 2 only	Student loans	
	=	Obligations arising out of a separation agreement or divorce	
<u> </u>	At least one of the debtors and another		
L	Check if this claim relates to a	that you did not report as priority claims	
1	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offest?		
	No	Other. Specify Taxes - Federal, State/Local	
	Yes	<u> </u>	

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First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page number them beginning with 4.4 followed by 4.5 and so forth

After lis	sting any entries on this page, number them be	eginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.38	IRS Non-Priority	Last 4 digits of account number	\$ 484.00
	Creditor's Name	0000	
	PO Box 7346	When was the debt incurred? 2008	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Philadelphia PA 19101	Unliquidated	
١ ,	City State Zip Code Vho owes the debt? Check one.	Disputed	
ľ	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
}		that you did not report as priority claims	
4	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
ls	s the claim subject to offest?	Debts to pension of profit-sharing plans, and other shallar debts	
	No	Other, Specify Taxes - Federal, State/Local	
	Yes		
4.39	IRS Non-Priority	Last 4 digits of account number	\$ <u>2,116.00</u>
	Creditor's Name	When was the debt incurred? 2009	
	PO Box 7346	When was the debt incurred? 2009	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	BUILDING BA 40404	Contingent	
	Philadelphia PA 19101	Unliquidated	
_ v	City State Zip Code Vho owes the debt? Check one.	Disputed	
	Debtor 1 only	_	
lī	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
l ř	Debtor 1 and Debtor 2 only	Student loans	
l ř	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
l i	Check if this claim relates to a	that you did not report as priority claims	
-	community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is	s the claim subject to offest?		
	No	Other. Specify Taxes - Federal, State/Local	
\square	Yes		
4.40	Kishwaukee Auto Corral	Last 4 digits of account number	\$ <u>0.00</u>
	Creditor's Name 3336 Kishwaukee St.	When was the debt incurred?	
		When was the dept incurred:	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Rockford IL 61109	Contingent	
	City State Zip Code	Unliquidated	
v	Who owes the debt? Check one.	Disputed	
E	Debtor 1 only		
[Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
[At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
7	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is	s the claim subject to offest?		
	No	Other. Specify Notice Only	
	Yes		

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After li	After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.			
4.41	MABT/Contfin	Last 4 digits of account number _	NULL	\$ <u>424.00</u>
	Creditor's Name	When was the debt incurred?	2015-2016	
	121 Continental Dr Ste 1 Number Street	when was the debt incurred?		
	Number Street			
		As of the date you file, the claim is:	: Check all that apply.	
	Newark DE 19713	Contingent		
	City State Zip Code	Unliquidated		
V	Who owes the debt? Check one.	Disputed		
	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
	Debtor 1 and Debtor 2 only	Student loans		
[At least one of the debtors and another	Obligations arising out of a separat	ion agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla	aims	
١.	community debt	Debts to pension or profit-sharing p	plans, and other similar debts	
	s the claim subject to offest?		0 1944	
	No Yes	Other. Specify Credit Card or	Credit Use	
4.42	MABT/Contfin	Last 4 digits of account number	NULL	\$ 740.00
4.42	Creditor's Name			·
	121 Continental Dr Ste 1	When was the debt incurred?	2015-2016	
	Number Street			
		As of the date you file, the claim is:	: Check all that apply.	
		Contingent		
	Newark DE 19713	Unliquidated		
v	City State Zip Code Who owes the debt? Check one.	Disputed		
ľ	Debtor 1 only	ш :		
	Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
	Debtor 1 and Debtor 2 only	Student loans	ciaiii.	
}	At least one of the debtors and another	Obligations arising out of a separat	ion agreement or divorce	
	Check if this claim relates to a	that you did not report as priority cla		
"	community debt	Debts to pension or profit-sharing p		
<u> </u>	s the claim subject to offest?			
	No	Other. Specify Credit Card or	Credit Use	
	Yes			
4.43	Merrick BANK	Last 4 digits of account number	NULL	\$ <u>1,085.00</u>
	Creditor's Name Po Box 9201	When was the debt incurred?	2015-2016	
	Number Street	THICH WAS AND ASSET MISCANICA.		
	Training Current			
		As of the date you file, the claim is	: Check all that apply.	
	Old Bethpage NY 11804	Contingent		
	City State Zip Code	Unliquidated		
<u> </u>	Who owes the debt? Check one.	Disputed		
	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
<u> </u>	Debtor 1 and Debtor 2 only	Student loans		
L	At least one of the debtors and another	Obligations arising out of a separat	-	
[Check if this claim relates to a	that you did not report as priority cla		
	community debt s the claim subject to offest?	Debts to pension or profit-sharing p	olans, and other similar debts	
ľ	No	Other. Specify Credit Card or	Credit Use	
	Yes	Other. Specify Credit Card of	Orealt Ose	

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First Name Middle Name Last Name

Port 2: Your NONPRIORITY Unsecured Claims - Continuation Page

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Total Claim

Aurora IL 60507
City State Zip Code

When was the debt? Check one

Aurora IL 60507
Disputed

Aurora IL 60507
Disputed

4.44 Nicor Gas	Last 4 digits of account number	\$ <u>500.00</u>
Creditor's Name		
PO Box 549	When was the debt incurred?	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Aurora IL 60507	Unliquidated	
City State Zip Code Who owes the debt? Check one.	Disputed	
Debtor 1 only	_	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	• • • • • • • • • • • • • • • • • • • •	
No	Other. Specify Utility Bills/Cellular Service	
Yes		
4.45 PNC National Bank	Last 4 digits of account number	<u>\$_500.00</u>
Creditor's Name		
PO Box 15019	When was the debt incurred?	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
Wilmington DE 40050 F	Contingent	
Wilmington DE 19850-50	Unliquidated Unliquidated	
City State Zip Code Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Other. Specify Credit Card or Credit Use	
Yes Deal-feed Health Dhyridians		÷ 50 00
4.46 Rockford Health Physicians	Last 4 digits of account number	\$ <u>50.00</u>
Creditor's Name 2300 N. Rockton	When was the debt incurred? 2016	
Number Street		
Number Street		
	As of the date you file, the claim is: Check all that apply.	
Rockford IL 61103	Contingent	
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No No	Other. Specify Medical/Dental Services	

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4.47 Rockiola Health Systems	Last 4 digits of account number IFLE	\$_1,000.00
Creditor's Name		
2400 N. Rockton Ave.	When was the debt incurred? 2014	
Number Street		
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Rockford IL 61103		
City State Zip Code	Unliquidated	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Other. Specify Medical Debt	
Yes	Other. Specify	
Bookford Morgantile	Last 4 digits of account number 0999	\$ 186.00
4.40	Last 4 digits of account number0999	φ_100.00
Creditor's Name	When was the debt incurred? 2014-2014	
2502 S Alpine Rd	When was the debt incurred?	
Number Street		
	As all the date was file the state to Obert all that and	
	As of the date you file, the claim is: Check all that apply.	
D 16 1 11 04400	Contingent	
Rockford IL 61108	Unliquidated	
City State Zip Code	Disputed	
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Student loans	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a	that you did not report as priority claims	
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Madical Dabi	
I	Other. Specify Medical Debt	
Yes	7400	
4.49 Rockford Mercantile	Last 4 digits of account number 7132	\$ _339.00
Creditor's Name		
2502 S Alpine Rd	When was the debt incurred? 2015-2015	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
	Contingent	
Rockford IL 61108	Unliquidated	
City State Zip Code		
Who owes the debt? Check one.	Disputed	
Debtor 1 only		
· = '		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	that you did not report as priority claims	
Check if this claim relates to a		
community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?		
No	Other. Specify Medical Debt	
Yes		

Record # 701962

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4.50	Rockford Mercantile	Last 4 digits of account number 1082	\$ <u>17,891.00</u>
	Creditor's Name		
	2502 S Alpine Rd	When was the debt incurred? 2014-2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Rockford IL 61108	Unliquidated	
	City State Zip Code		
<u> </u>	Vho owes the debt? Check one.	Disputed	
L	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
l ī	Debtor 1 and Debtor 2 only	Student loans	
1 7	╡		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
L	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offest?		
	No	Other. Specify Medical Debt	
	Yes		
4.51	Springleaf Financial S	Last 4 digits of account number 0290	\$ 6,134.00
	Creditor's Name		
	211 Elm St	When was the debt incurred? 2015-2015	
	Number Street		
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Rockford IL 61101	Unliquidated	
	City State Zip Code	Disputed	
<u> </u>	Vho owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Ī	Debtor 1 and Debtor 2 only	Student loans	
	=	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another		
L	Check if this claim relates to a	that you did not report as priority claims	
١.	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offest?		
	No	Other. Specify Personal Loan	
	Yes		
4.52	Swedish American Hospital	Last 4 digits of account number	\$ <u>150.00</u>
	Creditor's Name		
1	1401 East State. St.	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Developed II 04404	Contingent	
	Rockford IL 61104	Unliquidated	
١.,	City State Zip Code Who owes the debt? Check one.	Disputed	
	=	□	
1 <u>L</u>	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Γ	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims	
L	Check if this claim relates to a		
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	s the claim subject to offest?		
	No	Other. Specify Medical/Dental Service	
	Yes		

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4.53	U S DEPT OF ED/GSL/ATL	Last 4 digits of account number	5614	\$ 2,750.00
	Creditor's Name		2002 2012	
	Po Box 4222	When was the debt incurred?	2002-2012	
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
		Contingent		
	lowa City IA 52244	Unliquidated		
١,	City State Zip Code Who owes the debt? Check one.	Disputed		
	Debtor 1 only	_		
li	Debtor 2 only	Type of NONPRIORITY unsecured of	laim:	
l i	Debtor 1 and Debtor 2 only	Student loans		
l i	At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
l i	Check if this claim relates to a	that you did not report as priority clai	ims	
'	community debt	Debts to pension or profit-sharing pla	ans, and other similar debts	
!	s the claim subject to offest?	_		
	No	Other. Specify		
	Yes PERT OF ED/CCL/ATI		0000	. 0.070.00
4.54	U S DEPT OF ED/GSL/ATL	Last 4 digits of account number		\$ <u>9,976.00</u>
	Creditor's Name Po Box 4222	When was the debt incurred?	2000-2012	
	Number Street	when was the dest meaned:		
	Number			
		As of the date you file, the claim is:	Check all that apply.	
	Iowa City IA 52244	Contingent		
	City State Zip Code	Unliquidated		
\	Who owes the debt? Check one.	Disputed		
	Debtor 1 only			
[Debtor 2 only	Type of NONPRIORITY unsecured cl	laim:	
[Debtor 1 and Debtor 2 only	Student loans		
[At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
[Check if this claim relates to a	that you did not report as priority clai	ims	
Ι.	community debt	Debts to pension or profit-sharing pla	ans, and other similar debts	
	s the claim subject to offest?			
	No Yes	Other. Specify		
4.55	US Bank NA	Last 4 digits of account number		\$ 1,272.00
4.55	Creditor's Name	Last 4 digits of account number		
	PO Box 5229	When was the debt incurred?	2013	
	Number Street			
		As of the date you file, the claim is:	Check all that apply	
		Contingent		
	Cincinnati OH 45201	Unliquidated		
Ι,	City State Zip Code	Disputed		
'	Who owes the debt? Check one.	L		
	Debtor 1 only	- ()(0)(0)(0)(0)(0)		
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured cl	raini.	
	At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
		that you did not report as priority clai	-	
I	Check if this claim relates to a community debt	Debts to pension or profit-sharing pla		
1	s the claim subject to offest?	Depts to pension or pront-sharing pix	and, and other similar debts	
	No	Other. Specify Credit Card or C	Credit Use	
	Yes	Sais.: Spoon,		

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Verve Cardif Confinential Finance Last 4 digits of account number S 0.00	ter listing any entries on this page, number them b	neginning with 4.4, followed by 4.5, and so forth.	Total Claim
P.O. Box 8099 When was the debt incurred? Number Street Street Check off the claim is: Check all that apply. Confingert Check off the claim is: Check all that apply. Confingert Check off the claim relates to a commanity debt Check off the claim is: Check all that apply. Confingert Check if this claim relates to a commanity debt Check off the claim subject to offest? Check if this claim relates to a commanity debt Check off the claim subject to offest? Check if this claim relates to a commanity debt Check off the claim subject to offest? Check off the claim subject to offe	.56 Verve Card/Continental Finance	Last 4 digits of account number	\$ <u>0.00</u>
Newtark	Creditor's Name		
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		LI Debts to pension or profit-snaring plans, and other similar debts	
	oranii ouojoot to ontoot :		
Other. Specify Unknown Credit Extension Yes	No	Other Specify Unknown Credit Extension	

Case 16-80595 Doc 1 Filed 03/14/16 Entered 03/14/16 09:18:57 Desc Main Page 40 of 72 Case Number (if known) **Document** William James Debtor 1 First Name Webbank/Fingerhut \$ 505.00 NULL 4.59 Last 4 digits of account number Creditor's Name 2015-2016 6250 Ridgewood Rd When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Saint Cloud MN 56303 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? Other. Specify <u>Credit Card or Credit Use</u> List Others to Be Notified for a Debt That You Already Listed Part 3: 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Account Recovery Services, Inc On which entry in Part 1 or Part 2 list the original creditor? Name PO Box 2526 Line __1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Loves Park IL 61132 Last 4 digits of account number ____ _ City State Zip Code Portfolio Recovery Assoc. On which entry in Part 1 or Part 2 list the original creditor? Line 2 of (Check one): Part 1: Creditors with Priority Unsecured Claims 120 Corporate Blvd., Ste. 100 Part 2: Creditors with Nonpriority Unsecured Claims Number VA 23502 Last 4 digits of account number ____ 0680 Norfolk City State Zip Code Rockford Mercantile Agency On which entry in Part 1 or Part 2 list the original creditor? Line 3 _ of (Check one): Part 1: Creditors with Priority Unsecured Claims 2502 S. Alpine Rd. Part 2: Creditors with Nonpriority Unsecured Claims Number Street IL 61108 Last 4 digits of account number ____ IPLE_____ Rockford State Zip Code City Chex Systems On which entry in Part 1 or Part 2 list the original creditor? Name 7805 Hudson Rd., #100 Line 4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Street Number MN 55125-159 Woodbury Last 4 digits of account number _____ ___ State Zip Code City

Official Form 106E/F

Doc 1 Filed 03/14/16 Entered 03/14/16 09:18:57 Desc Main Case 16-80595

William Debtor 1

James

Dgcµment

Page 41 of 72
Case Number (if known)

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0.00
nom rait r	6b. Taxes and Certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claim
Total claims	6f. Student loans	6f.	\$82,823.00
nom rait 2	6g. Obligations arising out of a separation agreement	6g.	\$ 0.00
	or divorce that you did not report as priority claims		
		6h.	\$0.00
	claims 6h. Debts to pension or profit-sharing plans, and other	6h. 6i.	0.00

Schedule E/F: Creditors Who Have Unsecured Claims

		Caso 16 90	0505 Doc 1 J	Filad 02/14/16	Entered 03/14/16 09:18:57	Desc Main
Fill	in this inf	formation to identify			2 of 72	
Deb	otor 1	William	James	Sayvor		
		First Name	Middle Name	Last Name		
	otor 2 use, if filing)	Michelena First Name	Middle Name	Sayvor		
Uni	ted States I	Bankruptcy Court for the	: <u>NORTHERN</u> District of _	(State)		Check if this is an
	se Number (nown)			_		amended filing
Offic	cial Fo	orm 106G				amonada ming
			/ Contracts and	Uneynired Lea	SAS	12/1
Be as on the second sec	complete ation. If m nal pages you have	and accurate as possonore space is needed s, write your name and e any executory contect this box and subm	sible. If two married peopl , copy the additional page id case number (if known) tracts or unexpired leases hit this form to the court with	e are filing together, both, fill it out, number the end. ? n your other schedules. You	ntries, and attach it to this page. On the top of the t	f any
exa	-	nt, vehicle lease, cell			. Then state what each contract or lease is for ruction booklet for more examples of executory	
P	erson or	company with whom	you have the contract or	lease	State what the contract or le	ase is for
2.1						
	Name				-	
	Number	Street			-	
	City		State Zip	Code	-	
2.2						
	Name				-	
					-	
	Number	Street				
	City		State Zip	Code	-	
2.3						
	Name				-	
	Number	Street			-	
					_	
	City		State Zip	Code		
2.4						
	Name				-	
					-	
	Number	Street				
	City		State Zip	Code	-	
2.5						
	Name				-	
	Number	Street			-	
	INUITIDEF	Sueet				

State Zip Code

City

Official Form 106G

Case 16-80595 Doc 1 Filed 03/14/16 Entered 03/14/16 09:18:57 Desc Main

Fill in this in	formation to identify	your case:	
Debtor 1	William	James	Sayvor
	First Name	Middle Name	Last Name
Debtor 2	Michelena		Sayvor
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for th	e: <u>NORTHERN</u> District of _	
Case Number			(State)
(If known)			_

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. D	o you have any codebtors? (If you are filing a	joint case, do not list either s	pouse as a codebtor.)	
	No.			
	Yes			
2. W	ithin the last 8 years, have you lived in a con	nmunity property state or te	rritory? (Community p	property states and territories include
A	rizona, California, Idaho, Lousiiana, Nevada, N	ew Mexico, Puerto Rico, Tex	as, Washington, and V	Nisconsin.)
	No. Go to line 3.			
	Yes. Did your spouse, former spouse, or leg	al equivalent live with you at	the time?	
	No	ny did you live?	Fill in the r	name and current address of that person.
	Tes. Inwiner community state of territor	Ty did you live:		taille and carrent address of that person.
				
	Name of your spouse, former spouse or legal equival	ent		
	Number Street			
	City	State	Zip Code	
3. In	Column 1, list all of your codebtors. Do not		·	e is filing with you. List the person
	hown in line 2 again as a codebtor only if that			
	chedule D (Official Form 106D), Schedule E/F		schedule G (Official Fo	orm 106G). Use Schedule D,
S	chedule E/F, or Schedule G to fill out Column	2.		
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.1				Schedule D, line
	Name			_
				Schedule E/F, line
	Number Street			Schedule G, line
	City	State	Zip Code	
3.2				Schedule D, line
	Name			Schedule E/F, line
	Number Street			Schedule G, line
	01	0.1		Corlecture G, line
3.3	City	State	Zip Code	Schedule D, line
3.3	Name			_
				Schedule E/F, line
	Number Street			Schedule G, line
	City	State	Zip Code	

			71 / / / / / / / / / / / / / / / / / / /	_			
Fill in this information to identify your case:							
Debtor 1	William	James	Sayvor				
	First Name	Middle Name	Last Name				
Debtor 2	Michelena		Sayvor				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the :NORTHERN DISTRICT OF ILLINOIS Case Number							
(If known)			_				

Che	ck if this is:
	An amended filing
	A supplement showing post-petition
	chapter 13 income as of the following date:
	MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Describe Employment					
1.	Fill in your employment information		Debtor 1		Debtor 2 or non-filing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	X Employed Not employed		X Employed Not employed	
	Include part-time, seasonal, or self-employed work.	Occupation	Shift Manager		Substitute Teacher	
	Occupation may Include student or homemaker, if it applies.	Employers name	Android Industries	S	Rockford Schools	
		Employers address	1222 Crosslink		507 7th St.	
			Belvidere, IL 6100	8	Rockford, IL 61104	
		How long employed there?			3 years	
Pa	rt 2: Give Details About Monthl	y Income				
	Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse has lines below. If you need more space	ve more than one employer, comb	ine the information for a	•		
				For Debtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, c	y and commissions (before all parallel	•	\$6,294.92	\$923.22	
3.	Estimate and list monthly overting		\$0.00	\$0.00		
4.	Calculate gross income. Add line	2 2 + line 3.		\$6,294.92	\$923.22	

 Official Form 106I
 Record # 701962
 Schedule I: Your Income
 Page 1 of 2

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Debtor 1 William James Document Sayvor Page 45 of 72 Case Number (if known) Case Number (if known)

				For Debtor 1	For Debtor 2 or non-filing spouse
	Сор	y line 4 here	4.	\$6,294.92	\$923.22
5. L	ist all	payroll deductions:			
	5a. 1	Tax, Medicare, and Social Security deductions	5a.	\$1,149.22	\$56.83
	5b. I	Mandatory contributions for retirement plans	5b.	\$0.00	\$1.15
	5c. \	/oluntary contributions for retirement plans	5c	\$420.72	\$0.00
	5d. F	Required repayments of retirement fund loans	5d.	\$0.00	\$0.00
	5e. I	Insurance	5e.	\$323.68	\$0.00
		Domestic support obligations	5f. _	\$890.00	\$0.00
	_	Union dues	5g. _	\$0.00	\$0.00
		Other deductions. Specify: Life Insurance(D1),	5h. _	\$27.99	\$0.00
		e payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$2,811.62	\$57.98
7. C	alcula	te total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,483.31	\$865.24
8. Li	st all	other income regularly received:			
	8a.	Net income from rental property and from operating a business,			
		profession, or farm			
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			
		monthly net income.	8a.	CO OO	CO OO
	8b.	Interest and dividends	_	\$0.00	\$0.00
			8b. 	\$0.00	\$0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c. _	\$ 0.00	\$ 0.00
		Include alimony, spousal support, child support, maintenance, divorce			
		settlement, and property settlement.			
	8d.	Unemployment compensation	8d.	\$0.00	\$0.00
	8e.	Social Security	8e.	\$0.00	\$0.00
	8f.	Other government assistance that you regularly receive	8f.	\$0.00	\$0.00
		Include cash assistance and the value (if known) of any non-cash	_	Ψ0.00	
		assistance that you receive, such as food stamps (benefits under the			
		Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			
	8g.	Pension or retirement income	8g.	\$0.00	\$0.00
	8h.	Other monthly income. Specify:	8h.	\$0.00	\$0.00
9.	Add	all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	\$0.00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,483.31 +	\$865.24 = \$4,34
11.	othe Do n	e all other regular contributions to the expenses that you list in <i>Schedule</i> added contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are notify:	our depender	,	
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Ce		•	
13.		ou expect an increase or decrease within the year after you file this form			
	x				

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Fill i	in this ir	formation to identify	your case:				
Deb	otor 1	William	James	Sayvor	Check if this is:		
		First Name	Middle Name	Last Name	An amende	ed filing	
	otor 2	Michelena		Sayvor	A suppleme	ent showing pos	t-petition chapter 13
(Spou	use, if filing)	First Name	Middle Name	Last Name	income as	of the following	date:
		Bankruptcy Court for the	:_NORTHERN DIST	RICT OF ILLINOIS		YYYY	
	e Numbe nown)	r					
Offic	rial F	orm 106J				•	2 because Debtor 2
					maintains a	a separate house	enola.
		e J: Your E	-				12/14
more s	pace is				ooth are equally responsible for supplyi al pages, write your name and case nun	=	
questic	on.						
Part		Describe Your Househo	ld				
1. Is t	¬ ´	int case?					
	=	Go to line 2. Does Debtor 2 live in	a aanarata hayaaha	143			
Ľ	Yes.	X No.	a separate nouseno	iu r			
			ust file a separate So	chedule J.			
2. I	Do you l	have dependents?	No		Dependent's relationship to	Dependent's	Does dependent live
	Do not li Debtor 2	st Debtor 1 and		rill out this information for dependent	Debtor 1 or Debtor 2	age —	with you?
			odon (, opendon	Daughter	20	X Yes
	names.	tate the dependents'					No
					Daughter	19	X Yes
							No
					Grandson	_ 1	X Yes
							x No
					Daughter	14	Yes
					Doughton	7	x _{No}
					Daughter	7	Yes
	-	expenses include	X N)			
	•	s of people other that and your dependents	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	es			
Part :	2.	Estimate Your Ongoing	Monthly Expenses				
				te unless you are using this	form as a supplement in a Chapter 13	case to report	
expen	-	of a date after the ban			le J, check the box at the top of the for		
	•		-cash government a	ssistance if you know the va	alue		
of suc	h assist	ance and have includ	ed it on Schedule I:	Your Income (Official Form	106I.)		Your expenses
4.	The ren	tal or home ownershi	p expenses for your	residence. Include first mort	tgage payments and		
	-	for the ground or lot.				4.	\$800.00
	If not in	cluded in line 4:					
	4a. Re	eal estate taxes				4a.	\$0.00
	4b. Pr	operty, homeowner's,	or renter's insurance			4b.	\$0.00
		ome maintenance, repa				4c.	\$50.00
	4d. Ho	meowner's associatio	n or condominium du	es		4d.	\$0.00

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Case Number (if known) __

Document William **James**

Debtor 1

First Name Middle Name Last Name Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$300.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$300.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$875.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$275.00 9. Clothing, laundry, and dry cleaning 10. \$90.00 10. Personal care products and services \$200.00 11. Medical and dental expenses 11. \$495.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$125.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. \$100.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$160.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$558.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. 20c. Property, homeowner's, or renter's insurance \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 701962 Schedule J: Your Expenses Case 16-80595 Doc 1 Filed 03/14/16 Entered 03/14/16 09:18:57 Desc Main Document Page 48 of 72 Case Number (if known)

Debtor	1 Willian	m	James	Sayvor	Case Number (if known)		
	First Nar	ne	Middle Name	Last Name			
21.	Other. S	pecify: _	Postage/Bank Fees (\$5.00),			21.	\$5.00
22	Your moi	nthly ex	pense: Add lines 4 through 21.			22.	\$4,333.00
	The resul	t is your	monthly expenses.			L	
23.	Calculate	your m	nonthly net income.				
	23a.	Conv	line 12 (your comibined monthly inc	ome) from Schedule I		23a.	\$4,348.55
						_	\$4,333.00
	23b.	Сору	your monthly expenses from line 22	above.		23b. -	Φ4,333.00
	23c.		act your monthly expenses from you	ir monthly income.		23c.	\$15.55
		The re	esult is your monthly net income.			_	
24.	-	•	n increase or decrease in your exp	_			
			you expect to finish paying for your nt to increase or decrease because	•			
	X No	рауше	in to increase or decrease because	of a modification to the term	is or your mortgage?		
	\vdash	_					
	Yes.		Explain Here:				

 Official Form 106J
 Record #
 701962
 Schedule J: Your Expenses
 Page 3 of 3

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
No	
Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summary a correct.	nd schedules filed with this declaration and that they are true and
35,136.1	
✗ /s/ William James Sayvor	/s/ Michelena Sayvor
Signature of Debtor 1	Signature of Debtor 2
Date 02/26/2016	Date 02/26/2016
MM / DD / YYYY	MM / DD / YYYY

Fill in this in	Fill in this information to identify your case:					
Debtor 1	William First Name	James Middle Name	Sayvor Last Name			
Debtor 2	Michelena		Sayvor			
(Spouse, if filing)	First Name Rankruptcy Court for t	Middle Name he: <u>NORTHERN</u> District of	Last Name			
		ne . <u>Northern</u> District of	(State)			
Case Number (If known)	Г		_			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

num	er (if known). Answer every question.			
P	Give Details About Your Marital Status and Where Yo	ou Lived Before		
01.	What is your current marital status?			
	Married			
	Not married			
02	During the last 3 years, have you lived anywhere other tha	an where you live now	?	
	■ No. Yes. List all of the places you lived in the last 3 years. Do	o not include where yo	u live now.	
		·		
	Debtor 1	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
03	Within the last 8 years, did you ever live with a spouse or property states and territories include Arizona, California,			
	and Wisconsin.)	,,	,	
	■ No. Yes. Make sure you fill out Schedule H: Your Codebtors	(Official Form 106H)		
	Tes. Make sure you fill out oblication 11. Total codebiols	(Onicial i Oilli 10011).		
F	Explain the Sources of Your Income			

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William Debtor 1 James Sayvor Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, \$9,509 Wages, commissions, \$628.22 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$75,539 \$18,756 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, \$70,000 Wages, commissions. \$11,000 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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Debtor	1 <u>Wi</u>	illiam	James	Sayvor	—	Case Number (if known)	
		st Name	Middle Name	Last Name			
06 🛕	re eith	ner Debto	or 1's or Debtor 2's debts primarily	consumer debts?			
ſ	J No.	Neither	Debtor 1 nor Debtor 2 has primaril	v consumer debts. Co	onsumer debts are defined	in 11 U.S.C. § 101(8) as	
_			d by an individual primarily for a pers			m 11 0.0.0. 3 10 1(0) do	
			the 90 days before you filed for bank			or more?	
		_					
		☐ No.	. Go to line 7.				
		_	s. List below each creditor to whom yal amount you paid that creditor. Do i				
		chil	d support and alimony. Also, do not	include payments to a	n attorney for this bankrupt	tcy case.	
	* Sı	ubject to	adjustment on 4/01/16 and every 3 y	ears after that for case	es filed on or after the date	of adjustment.	
ľ	Ye		r 1 or Debtor 2 or both have primar the 90 days before you filed for ban	=	ny araditar a total of \$600 c	or moro?	
			•	iki upicy, did you pay a	ny creditor a total or \$000 t	or more?	
		∐ No.	. Go to line 7.				
		■ Yes	s. List below each creditor to whom y	ou paid a total of \$600	or more and the total amo	ount you paid that	
			ditor. Do not include payments for do				
			nony. Also, do not include payments		* *		
				Dates of	Total amount paid	Amount you still owe	Was this payment for
				payments			
		-	GM Financial Po Box 181145	Monthly	\$ 1,674	\$ 25,652	Mortgage
		-	Arlington TX 76096				Car
		-					☐ Credit card ☐ Loan repayment
		-					Suppliers or vendors
							Other
		_					

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Debto	r 1	William	James	Sayvor	_	Case Number (if known))
		First Name	Middle Name	Last Name			
	Insid corp age	ders include your relate orations of which you	filed for bankruptcy, did yor tives; any general partners u are an officer, director, pe u business you operate as a d alimony.	; relatives of any genera	partners; partnership of 20% or more of the	ps of which you are a general period in the securities; and a	any managing
		No.					
	,	Yes. List all payments	s to an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
		Patrica Patton		Bi-weekly	\$1,080	\$	Child Support
		1270 Sandhurst					
		South Elgin 60177					
		Shaquonda Lee		Bi-weekly	\$1,440	\$	Child Support
		225 College St. Apt	1	,			
00	/ A /: 41-	.: 4	filed for boulence to colid co.				t have fited
	an ii	nsider?	filed for bankruptcy, did you ts guaranteed or cosigned		transier any propert	y on account of a debt tha	t benefited
		No.					
		Yes. List all payments	s to an insider.				
				Dates of	Total amount	Amount you still	Reason for this payment
				payment	paid	owe	Include creditor's name
	art 4:		tions, Repossessions, and I				
	List		filed for bankruptcy, were y uding personal injury cases ct disputes.				ort or custody
		No.					
	$\overline{\Box}$	Yes. Fill in the details					
				Nature of the case	Court o	or agency	Status of the case
10			filed for bankruptcy, was ar fill in the details below.	ny of your property repos	ssessed, foreclosed, (garnished, attached, seize	ed, or levied?
		No. Go to line 11					
		Yes. Fill in the informa	ation below.				
			ou filed for bankruptcy, die ment because you owed a	- ·	g a bank or financial	institution, set off any ar	mounts from your accounts
		No. Go to line 11					
		Yes. Fill in the informa	ation below.				
			filed for bankruptcy, was		the possession of a	an assignee for the benef	it of creditors, a
	_	rt-appointed receiver No.	, a custodian, or another	ometal (
	, i	NO.					
	\Box	res.					
	□ \	es.					

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James Sayvor Case Number (if known)

Last Name

P	List Certain Gifts and Contributions			
13	Within 2 years before you filed for bankruptcy, did y	ou give any gifts with a total value of more than \$600 per pers	on?	
	No.			
	Yes. Fill in the details for each gift.			
14	Within 2 years before you filed for bankruptcy, did y	ou give any gifts or contributions with a total value of more th	an \$600 to any cha	arity?
	☐ No.			
	Yes. Fill in the details for each gift.			
	Office an acceptable of the state of the sta	Describe substants and distributed	Data	Walter
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
	New Zion Church	Money	Calendar Year	\$1500
	New Zion Ondron		Guichadi Tali	Ψ1000
				
				
	List Contain Lagge			
	List Certain Losses			
15	Within 1 year before you filed for bankruptcy or sinc gambling?	ee you filed for bankruptcy, did you lose anything because of t	heft, fire, other dis	aster, or
	No.			
	Yes. Fill in the details for each gift.			
P	List Certain Payments or Transfers			
16	about seeking bankruptcy or preparing a bankruptc	ou or anyone else acting on your behalf pay or transfer any pro y petition? s, or credit counseling agencies for services required in your		ou consulted
	Yes. Fill in the details			
	Party Contact Info	Description and value of any property transferred	Date payment	Amount of payment
	. ,		or transfer	ca c. payc
	Geraci Law L.L.C.			Payment/Value:
	55 E. Monroe Street #3400			\$2,495.00: \$890.00
	Chicago,IL 60603			paid prior to filing, balance to be paid
				after case filing.
	Party Contact Info	Description and value of any property transferred	Date payment or transfer	Amount of payment
	Hananwill Credit Counseling	Credit Counseling Services	2016	\$25.00
	115 N. Cross St.			
	Robinson, IL 62454			

William

First Name

Middle Name

Debtor 1

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otor 1	William	James	Sayvor	Case I	Number (if known)	
	First Name	Middle Na	ame Last Name			
pro	omised to	help you deal with your cre	ruptcy, did you or anyone else acting o editors or to make payments to your cr r that you listed on line 16.		efer any property to an	yone who
	No.					
	Yes. Fill i	n the details.				
tra Inc	nsferred i lude both	n the ordinary course of yourse of yourse of yourself transfers and transfers and transfers and transfers	kruptcy, did you sell, trade, or otherwis our business or financial affairs? nsfers made as security (such as the gr you have already listed on this stateme	ranting of a security intere		
	No.					
	Yes. Fill i	n the details for each gift.				
	_	ars before you filed for bar (These are often called as	nkruptcy, did you transfer any property set-protection devices.)	to a self-settled trust or s	similar device of which	ı you are a
	No.					
Ц	Yes. Fill	n the details for each gift.				
Part (: List	Certain Financial Accounts,	Instruments, Safe Deposit Boxes, and Sto	orage Units		
so Inc	ld, moved lude ched	, or transferred? king, savings, money mar	ruptcy, were any financial accounts or i ket, or other financial accounts; certific associations, and other financial institu	cates of deposit; shares ir	-	
	No.					
		n the details.				
ш	100.11	in the detaile.	Last 4 digits of account number	Type of account or	Date account was	Last balance before
				instrument	closed, sold, moved, or transferred	closing or transfer
					or transferred	
	-	have, or did you have with er valuables?	nin 1 year before you filed for bankrupto	cy, any safe deposit box o	or other depository for	securities,
	Yes. Fill	n the details.				
			Who else had access to it?	Describe the conte	nts	Do you still have it?
На	ve you st	ored property in a storage	unit or place other than your home with	nin 1 year before you filed	for bankruptcy?	
	No.					
	Yes. Fill i	n the details.				
			Who else has or had access to it?	Describe the conte	nts	Do you still
						have it?
art :	lder	tify Property You Hold or Co	ntrol for Someone Else			
	you hold someone		at someone else owns? Include any pro	operty you borrowed from	ı, are storing for, or ho	old in trust
	No.					
Ц	Yes. Fill	n the details.	Milhaus is the suspends 2	Describe the manual		Value
			Where is the property?	Describe the prope	пту	Value

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William James Sayvor Case Number (if known)

Give Details About Environment	tal Information				
e purpose of Part 10, the following d	efinitions apply:				
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.					
Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.					
• •		lous waste, hazardous substance, toxic			
rt all notices, releases, and proceedir	ngs that you know about, regardless of	when they occurred.			
as any governmental unit notified yo	ou that you may be liable or potentially l	iable under or in violation of an environmental	law?		
No.					
Yes. Fill in the details.	Governmental unit	Environmental law, if you know it	Date of notice		
_	init of any release of hazardous materia	17			
_	Governmental unit	Environmental law, if you know it	Date of notice		
ave you been a party in any judicial o	or administrative proceeding under any	environmental law? Include settlements and or	rders.		
No.					
Yes. Fill in the details.					
	Court or agency	Nature of the case	Status of the case		
Give Details About Your Busines	ss or Connections to Any Business				
•••		ve any of the following connections to any busi	ness?		
/ithin 4 years before you filed for ban			ness?		
/ithin 4 years before you filed for ban ☐ A sole proprietor or self-emplo ☐ A member of a limited liability of	akruptcy, did you own a business or hav	vity, either full-time or part-time	ness?		
/ithin 4 years before you filed for ban A sole proprietor or self-emplo A member of a limited liability of A partner in a partnership	nkruptcy, did you own a business or hav yed in a trade, profession, or other activ company (LLC) or limited liability partne	vity, either full-time or part-time	ness?		
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	te means any location, facility, or proor used to own, operate, or utilize it, azardous material means anything are obstance, hazardous material, pollutart all notices, releases, and proceedings any governmental unit notified you will be any governmental unit notified you will be any governmental unit notified any governmental unit notifie	cluding statutes or regulations controlling the cleanup of these substances, te means any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites. azardous material means anything an environmental law defines as a hazard abstance, hazardous material, pollutant, contaminant, or similar term. It all notices, releases, and proceedings that you know about, regardless of las any governmental unit notified you that you may be liable or potentially law on the liable or potentially law on the liable or potentially law on the liable or potentially law of the law of the liable or potentially law of the liable or potentially law of the liable or potentially law of the liable or potentially law of the liable or potentially law of the liable or potenti	te means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize or used to own, operate, or utilize it, including disposal sites. Azardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic abstance, hazardous material, pollutant, contaminant, or similar term. It all notices, releases, and proceedings that you know about, regardless of when they occurred. It all notices, releases, and proceedings that you may be liable or potentially liable under or in violation of an environmental No. Yes. Fill in the details. Governmental unit Environmental law, if you know it ave you notified any governmental unit of any release of hazardous material? No. Yes. Fill in the details. Governmental unit Environmental law, if you know it ave you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and on No. Yes. Fill in the details.		

Debtor 1

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 William
 James
 Sayvor
 Case Number (if known)

 First Name
 Middle Name
 Last Name

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
✗ /s/ William James Sayvor	/s/ Michelena Sayvor			
Signature of Debtor 1	Signature of Debtor 2			
Date 02/26/2016 MM / DD / YYYY	Date <u>02/26/2016</u> MM / DD / YYYY			
Did you attach additional pages to Your Statement of Financial Affairs	s for Individuals Filing for Bankruptcy (Official Form 107)?			
No				
Yes				
Did you pay or agree to pay someone who is not an attorney to help y	ou fill out bankruptcy forms?			
No				
Yes. Name of person	. Attach the Bankruptcy Petition Preparer's Notice,			
	Declaration, and Signature (Official Form 119).			

Sign Below

Eilad 02/14/16 Entered 03/14/16 09:18:57 Desc Main Fill in this information to identify your case: 8 of 72 William James Sayvor Debtor 1 First Name Middle Name Last Name Michelena Sayvor Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the : <u>NORTHERN DISTRICT OF ILLINOIS WESTERN</u> DIVISION District of ILLINOIS Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors,

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

write your name and case number (if known).

For any creditors that you listed in Part 1 of Schedule D: Creditor information below.	ors Who Have Claims Secured by Property (Official Form 106D	ı), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: GM Financial Description of property securing debt: CM Financial 2015 Chevrolet Impala with over 5,000 miles	 Surrender the property Retain the property and redeem it Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	■ No □ Yes
Creditor's name: Description of property securing debt:	Surrender the property Retain the property and redeem it Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	Surrender the property Retain the property and redeem it Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	Surrender the property Retain the property and redeem it Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No □ Yes

William

Case 16-80595

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Document Page 59 of 2 2 umber (if known)

Desc Main

List Your Unexpired Personal Property Leases

F	listed in Oakadula Oa Franciscus Oantwarte and Harring in dilace	(Official Farms 4000)
	listed in Schedule G: Executory Contracts and Unexpired Least	
	eases. Unexpired leases are leases that are still in effect; the lea	
ended. You may assume an unexpired personal pro	perty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leas	es	Will the lease be assumed?
		П.,
Lessor's name:		No
Description of leased		☐ Yes
Description of leased		
property:		
Legger's name:		□ No
Lessor's name:		
Description of leased		☐ Yes
property:		
Laggaria nama:		□No
Lessor's name:		No
Description of loaned		Yes
Description of leased property:		
Lessor's name:		□No
Ecosor s name.		
Description of leased		□Yes
property:		
F - F - 9		
Lessor's name:		□No
Ecosor s name.		
Description of leased		□Yes
property:		
F -F - 9		
Lessor's name:		□No
Description of leased		□Yes
property:		
· · · ·		
Lessor's name:		□No
		Yes
Description of leased		☐ Yes
property:		
Part 3: Sign Below		
Jnder penalty of perjury, I declare that I have indicate	ed my intention about any property of my estate that secures a	debt and any
personal property that is subject to an unexpired leas		-
<u>.</u>		
Le /s/ William James Saurer	✗ /s/ Michelena Sayvor	
/s/ William James Sayvor Signature of Debtor 1	Signature of Debtor 2	-
	-	
Date Dated: 02/26/2016	Date <u>Dated: 02/26/2016</u>	
MM / DD / YYYY	MM / DD / YYYY	

Official Form 108

Record # 701962

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

In re		
William James Sayvor and Michelena Sayvor /	Case No:	
Debtors	Chapter:	Chapter 7
DISCLOSURE OF CO	MPENSATION OF ATTORNEY FOR DE	BTOR
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing of trendered or to be rendered on behalf of the debtor(s) in contents.	the petition in bankruptcy, or agreed to be pain	id to me, for services
For legal services, I have agreed to accept	\$2,495.00	
Prior to the filing of this statement I have received	\$890.00	
Balance Due	\$1,605.00	
2. The source of the compensation paid to me was:		
Debtor(s) Other: (specify		
3. The source of compensation to be paid to me is:		
Debtor(s) Other: (specify		
I have not agreed to share the above-disclosed comp	pensation with any other person unless they a	re members and associates
of my law firm.		
I have agreed to share the above-disclosed compens	ation with a other person or persons who are	not members or associates
5. In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspects of the bankru	uptcy
case, including:		
 a. Analysis of the debtor's financial situation, and reno pankruptcy; 	dering advice to the debtor in determining wh	nether to file a petition in
b. Preparation and filing of any petition, schedules, sta	tements of affairs and plan which may be rec	quired;
c. Representation of the debtor at the meeting of credit	tors and confirmation hearing, and any adjour	rned hearings thereof;
6. By agreement with the debtor(s), the above-disclosed fee	does not include the following service:	
Fee does NOT include missed meeting or court of	· ·	y complaints or conversions to another
chapter, judicial lien avoidances, dischargeability actions, other	er contested matters except the first meeting of	of creditors.
	CERTIFICATION	
I certify that the foregoing is a complete payment to	statement of any agreement or arrangement to	for
me for representation of the debtor(s) in this	bankruptcy proceedings.	
Date: 03/03/2016	/s/ Jason Kyle Nielson	
Date	Signature of Attorney	
	Geraci Law L.L.C.	
	Name of law firm	

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Geraci Law L.L.C.

Castational (1930) Granters of E. Molinide Street 43461 6 hicago, 10 60303 12432 6809: 18:57 per Desc Main

Date: 1/30/2016

Consulation Attorney: Page 61 of 72

Record #: 701-962



Chapter 7 Retainer Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 7 bankruptcy under the following

Attorney fees for the Chapter 7 bankruptcy are \$ This amount does NOT INCLUDE court filing fees of \$335, or costs for credit counseling or financial management classes. This fee is based on the anticipated amount of work required to complete my case, and upon the information I have provided to date. If any information is incomplete or incorrect, the advice or Chapter may have to change, and this fee may have to be adjusted. This fee includes all work in the representation of my normal Chapter 7, including preparation of my bankruptcy petition, schedules and other documents, first 341 meeting, reaffirmations, normal correspondence with my creditors and myself, but does NOT include excessive work caused by you, missed 341 meetings, reopening the case, amendments to schedules, work on audits or asset cases, objections to exemptions, conversion to another chapter, evidentiary hearings, other contested matters or motions, or adversary proceedings, because these cannot be predicted in setting a flat fee. For work done on these matters, we bill between \$275/hr and \$450/hr for attorney time, based on the attorney doing the work, and \$85 to \$125/hr paralegal time. I agree that more than one attorney and paralegal will work on my case.

Fees are "flat fees" and "advance payment retainers" for pre-filing work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". You may elect to be billed on an hourly basis, but we have found a flat fee is cheaper and benefits you. If this contract is terminated by either party prior to the filing of the case, the firm will refund unearned fees based on the above rates with an accounting, and on request, submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

I understand that bankruptcy laws only allow me to protect a certain amount of my property, and if I have any unprotected property, I understand my Chapter 7 Trustee can sell it if I do not or cannot buy out the Trustee's interest and that the U.S. Trustee may object to my filing a Chapter 7 if they believe I have excess income and should be filing a Chapter 13.

I agree to fully cooperate with my attorneys and provide all information requested at any point during the case. I understand that if I do not fully cooperate or provide complete and accurate information, my attorneys may withdraw from representation of me, with the

If I have secured debts that I wish to retain (mortgages, financed vehicles or other financed property) that I may be required to sign a reaffirmation agreement with the creditor in order to keep the property, and I must remain current on my payments. Many mortgage and car companies refuse to reaffirm the debt but we have found that if you keep up your payments you keep the property anyway.

Debts not discharged if they not paid in full: student loans; educational debts & tuition; most tax debts: unfiled, trust fund or late filed tax; undisclosed debts; support/maintenance debts; fines, debts incurred by fraud, or after the case is filed, future condo/HOA dues,or debts listed in your red or green folder as usually not discharged, or found non-dischargeable by a Judge.

Representation limited to Bankruptcy Court We don't represent you in state court, or loan modifications or similar matters.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition.

I understand that if I fail to take my financial management class after filing but before discharge, my case may be closed without a discharge, and I will be required to pay fees and costs to have it reopened. I have received the 11 U.S.C § 527(a) disclosures.

William Sayvor(Debter)

Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 150511

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

William James Sayvor and Michelena Sayvor / Debtors

In re

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

Document Page 63 of 72 In re William James Sayvor and Michelena Sayvor / Debtors

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

Record # 701962 B 201A (Form 201A) (11/11) Page 1 of 2

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

deny your found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 02/26/2016	/s/ William James Sayvor		
	William James Sayvor	-	
Dated: 02/26/2016	/s/ Michelena Sayvor		
	Michelena Sayvor	-	
Dated: 03/03/2016	/s/ Jason Kyle Nielson		
	Attorney: Jason Kyle Nielson	-	

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Debtor 1	William	James	Sayvor	Case Number (# F	known)
	First Name	Middle Name	Last Name		
Part 6	Answer These Question	ns for Reporting Purposes		·	
	hat kind of debts do	16a. Are your debts p	rimarily consumer debta	s? Consumer debts are defi onal, family, or household p	fined in 11 U.S.C. § 101(8) ourpose."
y	ou have?	No. Go to line 1			
		—		2 Business debte ere debte	that you incurred to obtain
		16b. Are your debts p money for a busines	orimarily business debts ss or investment or through	the operation of the busines	ss or investment.
		□No. Go to line 1 □Yes. Go to line			
		16c. State the type of de	ebts you owe that are not co	nsumer debts or business d	debts.
	are you filing under Chapter 7?	-	under Chapter 7. Go to line		
	o you estimate that after		der Chapter 7. Do you estin e expenses are paid that fur	nate that after any exempt p nds will be available to distril	property is excluded and bute to unsecured creditors?
	ny exempt property is excluded and	No.			
	dministrative expenses	Yes.			
	re paid that funds will be	☐163.			
_	vailable for distribution o unsecured creditors?				
		1 -49	□ 1,000-	5.000	25,001-50,000
	low many creditors do ou estimate that you	□ 50-99	☐ 5,001-		50,001-100,000
-	owe?	100-199	□ 10,00°	1-25,000	☐ More than 100,000
		200-999			
40	How much do you	\$0-\$50,000	\$1,000	0,001-\$10 million	□\$500,000,001-\$1 billion
	estimate your assets to	\$50,001-\$100,000	\$10,00	00,001-\$50 million	\$1,000,000,001-\$10 billion
	be worth?	\$100,001-\$500,00		00,001-\$100 million	\$10,000,000,001-\$50 billion
		\$500,001-\$1 millio	n 🔲 \$100,	000,001-\$500 million	☐More than \$50 billion
20.	How much do you	\$0-\$50,000	□ \$1,00	0,001-\$10 million	☐\$500,000,001-\$1 billion
	estimate your liabilities	\$50,001-\$100,000	\$10,0	00,001-\$50 million	\$1,000,000,001-\$10 billion
ł	to be?	\$100,001-\$500,00		00,001-\$100 million	\$10,000,000,001-\$50 billion
		☐ \$500,001-\$1 millio	on 🔲 \$100,	000,001-\$500 million	☐ More than \$50 billion
Part	7: Sign Below				
For y	ou	I have examined this pe correct.	etition, and I declare under p	enalty of perjury that the info	formation provided is true and
***************************************		If I have chosen to file u of title 11, United States under Chapter 7.	ınder Chapter 7, I am aware s Code. I understand the reli	that I may proceed, if eligib lef available under each cha	ole, under Chapter 7, 11,12, or 13 apter, and I choose to proceed
		If no attorney represent this document, I have o	ts me and I did not pay or agobtained and read the notice	ree to pay someone who is required by 11 U.S.C. § 34:	not an attorney to help me fill out 2(b).
		-	dance with the chapter of tit		
		I understand making a t with a bankruptcy case 18 U.S.C. §§ 152, 1341	can result in fines up to \$25	property, or obtaining mone 50,000, or imprisonment for	ey or property by fraud in connection up to 20 years, or both.
***************************************		* William	en Jackos	x	Male Language of Debtor 2
***************************************		Signature of Debi	1 125 17016	_	2 25 2015
		Executed on	<u>~ ~ 2</u> 010	Exe	MM / DD / YYYY

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Fill in this in	formation to identify ye	our case:	
Debtor 1	William	James	Sayvor
	First Name	Middle Name	Last Name
Debtor 2	Michelena	Middle Name	Sayvor
(Spouse, if filing)	First Name		Last Name
United States Case Number (If known)	Bankruptcy Court for the :	NORTHERN District	of <u>ILLINOIS</u> (State)

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to help you fil	Il out bankruptcy forms?
No Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summary and sched	lules filed with this declaration and that they are true and
Signature of Debter 1 Date 2 125 /2016 Date 1	12 1 25 /2016

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Debtor 1	William	James	Sayvor	Case Number (if known)
2	First Name	Middle Name	Last Name	

t 12: Sign Below
have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the inswers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 8 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date //2016 MM / DD / YYYY Date //2016 MM / DD / YYYY
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No
□ Yes
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?
No Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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tor 1	William	James	Sayvor	Case Number In Michael
	First Name	Middle Name	Last Name	
art 2:	List Your Unex	pired Personal Property Lea	ses	
any	unexpired personal	property lease that you lis	ted in Schedule G: Executory Co	ontracts and Unexpired Leases (Official Form 106G),
n the	n information helow.	Do not list real estate leas	es. Unexpired leases are leases	that are still in effect; the lease period has not yet
ed. \	You may assume an	unexpired personal prope	rty lease if the trustee does not a	ssume it. 11 U.S.C. § 303(p)(2).
Des	cribe your unexpired	i personal property leases		Will the lease be assumed?
l acc	sor's name:	•		□ No
Les	soi s name.			Yes
	cription of leased	l .		
prop	perty:			
				☐ No
Les	sor's name:			☐ Yes
Des	scription of leased	d		
	perty:			
				□ No
Les	ssor's name:			
	i-tion of looso	d		
	scription of lease perty:	u		
				□No
Les	ssor's name:			
				Li Yes
	scription of lease operty:	ed		
pic	operty.			
Le	ssor's name:			□No
				∐Yes
	escription of lease	ed		
pro	operty:			
	essor's name:			□No
	essoi s name.			Yes
De	escription of lease	ed		
	operty:			
				□No
Le	essor's name:			Yes
ח	escription of leas	ed		
	roperty:			
Par	it 8: Sign Below			
				erty of my estate that secures a debt and any
Unde	er penalty of perjury,	I declare that I have indica	ated my intention about any prop	erty of my estate that secures a debt and any
perso	onal property that is	subject to an unexpired le	1 h	0 ha//040 Can man
//	Milliant	Con Alres	W/IU	CHULDIUGSCHIM)
X	Signature of Debtor 1	The state of the s	Signature of De	ebtor 2

Doc 1 Filed 03/14/16 Entered 03/14/16 09:18:57 Document Page 69 of 72 DISCLAIMER Debtors have read and agree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume

18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income/or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE!!!! X Date & Sign

William James Sayvor

Michelena Sayvor

X Date & Sign

Asset Disclosure

Page 1 of 1

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

In re

William James Sayvor and Michelena Sayvor / Debtors

701962

Record #

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

X Date & Sign William James Say X Date & Sign

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571. Page 1 of 1

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ebtor 1	William	James	Sayvor		Case Number (if know	m)		
-0.01	First Name	Middle Name	Last Name	4				***************************************
					Column A	Colur	8886655454688686660000000000000000000000	****
					Debtor 1	\$500 TEMPERATURE	or 2 or iling spouse	
Unem	ployment compens	ation			\$0.00		\$0.00	
Dono	t onter the amount if	you contend that the amount	t received was a benefit					
under	the Social Security	Act. Instead, list it nere						
For y	ou							
Fory	our spouse							
_	45	come. Do not include any an	nount received that was a					
. Pens	ition or retirement in fit under the Social S	Security Act.	nount robbiton man man		\$0.00		\$0.00	
∩ Inco	me from all other so	ources not listed above. Spe	cify the source and amou	nt.				
D	et include any banaf	its received under the Social e, a crime against humanity, o	Security Act or payments	IECEIVEG				
as a terro	rism. If necessary, lis	st other sources on a separat	te page and put the total o	n line 10c.	40.00	•	0.00	
					\$0.00	<u> </u>	0.00	
					\$ 0.00		\$0.00	
		separate pages, if any.			\$0.00		\$0.00	
		rent monthly income. Add lin	nes 2 through 10 for each		\$2,500.00	+	\$1,100.00 =	\$3,600.00
11. Cald colu	mn. Then add the to	tal for Column A to the total for	or Column B.		\$2,300.00	T		
Part 2	Determine Wh	ether the Means Test Applies	to You					
12. Cal	culate your current	monthly income for the year	r. Follow these steps:		Come line 44 hor	•	12a.	\$3,600.00
12a.	Copy your total cu	rrent monthly income from lin	ne 11		Copy line 11 ner	5		x 12
	Multiply by 12 (the	e number of months in a year).					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
12b	. The result is your	annual income for this part o	f the form.				12b.	\$43,200.0
		amily income that applies to					•	
13. Cal	culate the median to	aminy income that applies to	, , , 0.1011 111111111111111111111111111	1				
Fill	in the state in which	you live.		IL				
- :	in the number of per	ople in your household.		4				
			L				13.	\$86,818.0
Fill	in the median family	income for your state and si	ze of household	······			13.	\$00,010.0
. -	c	ole median income amounts, n. This list may also be availa	an online using the link SD	ecified in the separa	te .			
Ins	and choris for this form	i. This list may also be at all						
14. Ho	w do the lines comp	pare?						
\$		s than or equal to line 13. On	the top of page 1, check t	ox 1, There is no p	resumption of abuse.			
146	Go to Part 3.							
141	o. Line 12b is mo	re than line 13. On the top of	page 1, check box 2, The	presumption of abu	ise is determined by F	orm 122A-2	2.	
1-61	Go to Part 3 ar	nd fill out Form 122A-2.						
Part	3: Sign Below		1					
				this state	d in any attachments is	s true ander	orrect.	
	By signing here,	i declare under penalty of pe	erfur that the information	on this statement and	In all allacing alls		118 (
***************************************	9011	linnel ho	1205	$\mathcal{I}V$	KIN QINU	UVOL	WUUU	
	U WKN	Milliam Land South	or -	-11 [Michelena Sa	yvor /	7	
******		William Sames Sayvo	JI.	U	. ^~		J	
	/	2/25/2016		Date:: △	1 1d 5 1201E	;		
***************************************	Date:	<u> </u>		Date	/ 1010 12 010	-		
******	if you checked li	ine 14a, do NOT fill out or file	Form 122A-2.					
***************************************		ine 14b, fill out Form 122A-2						
1	ii you crieckeu i	mio 140, mi out i onni 1201 a			·····		······································	•••••

Form B 201A, Notice to Consumer Debtor(s)

In re William James Sayvor and Michelena Sayvor / Debtors

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 2 125/2016

William James Sayvoi

X Date & Sign

Dated: ///// /2016

Michelena Savvor

X Date & Sign

Dated: 3/2/2016

Attorney: Jason Kyle Nielson